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OBSERVATIONS

ON THE

CAUSES, SYMPTOMS, AND TREATMENT

OF

DERANGEMENT OF THE MIND,

FOUNDED ON AN

EXTENSIVE MORAL AND MEDICAL PRACTICE

IN THE

TREATMENT OF LUNATICS.

BY

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TOGETHER WITH THE PARTICULARS OF THE SENSATIONS AND IDEAS OF A GENTLEMAN DURING HIS MENTAL ALIENATION, WRITTEN BY HIMSELF DURING HIS CONVALESCENCE.

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"I AM LONG SINCE PERSUADED, THAT TO SAY OR DOE AUGHT WORTH MEMORY OR IMITATION, NO PURPOSE OR RESPECT SHOULD SOONER MOVE US, THAN SIMPLY THE LOVE OF GOD AND OF MANKIND."

Milton, in his Letter to Hartlib.

PREFACE.

IN offering the following Observations on the Treatment of Derangement of the Mind, I am well aware that the intrusion of a treatise into a department of Science, which is already crowded with publications, must be injurious if useless. I flatter myself, however, that the reader will excuse my temerity, when he is informed, that the following pages are founded on the notes and observations, the result of a personal examination of the Symptoms of Insanity, in the cases of about seven hundred lunatics, and which examinations were carefully made, and very frequently repeated during the progress of treatment.

In the commencement of my practice, it was my design to draw up a series of cases of the various species of insanity; together with the medical and moral treatment of each; so as to exhibit a fair specimen of the success and failures of the different modes, and when opportunity offered, also to have examined the appearances of the brain, as well as of the viscera of the thorax and abdomen: this design, as far as regards the recording of cases, and the moral and medical practice, I have carried fully into execution: but in prosecuting investigations in the morbid anatomy of the insane, many difficulties were encountered; which

however, may be the less regretted, as it is not very probable that any new facts would have been added, by these means, to the large collection already before the public; and which has been hitherto, only of a negative utility. One morbid appearance however, which seems peculiarly characteristic of insanity, has been observed, and in its proper place shall be noticed.

Although the experienced Pathologist may not find in this sketch that information most conducive to assist him in his researches, yet I venture to hope, that should he honour it with a perusal, he may not find his labour wholly fruitless; and from my statements of the curative process, that some useful information may be derived.

To make myself generally acquainted with the opinions of others, relative to Derangement of the Mind, appeared to me an indispensable duty attached to my official situation; yet I studiously endeavoured to avoid all bias in favour of, or against any opinions or modes of practice; and I am not aware of having been unsuccessful in this effort. In constructing the rough draught of this imperfect sketch, no reference was made to any author whatever; but when a fair copy was drawn, an anxiety led me to examine how I agreed with those who had written on this subject; and then I was induced to quote them, and comment on them; not however in the least altering the sense, and very seldom altering the composition of the rough sketch. My reader, I doubt not, will conceive the gratification I felt in turning over the pages of some of these Authors, as well as the astonishment at finding the glaring disagreement that

existed in the results of my experience, and in the experience of some others: this I very much regret. I have, however, endeavoured to put my reader in possession of all the facts, and practical information, that occur to me to be of importance, in plain, simple, and concise language.

I use the terms Insanity and Derangement of the Mind synonymously.

If at any time my style is didactic, or through conciseness not sufficiently intelligible, I beg my reader to do me the justice to believe, that I am actuated by a desire to œconomize his time; I should have been glad if the *ipse dixit* had appeared less in these pages; but those who doubt the facts and inferences, may, I presume, consult those records of medical practice in the Lunatic Asylum, for the County of Lancaster, which were carefully kept by myself, and whence a large portion of the materials for constructing these practical observations have been obtained.

These journals are classed, as I am *officially* informed, among the public records of that institution; I fear they are unworthy the rank that has been assigned to them; they were written for my private inspection and guidance only, and are very far from being in a fit state to meet the public eye:—my reader is therefore referred to them with much diffidence and reluctance; and they would not have been obtruded on his notice, *could they have been obtained for the purpose of making the necessary extracts for illustration.*

In presenting to my reader the statement of the sensations, emotions, and ideas of a person during the progress of insanity; it may be proper to state how so unique a production was obtained; since so great a *desideratum* has often been sought for, but I believe, has never before been procured. The narrator is a gentleman of considerable talent, and liberal education. During his convalescence, he ransacked my little library, and having soon exhausted all he chose to read, I suggested to him to write an account of his ideas, &c. during his late derangement; having previously remarked that he remembered, with the accuracy of a sane person, most of the occurrences that were at all likely to arrest the attention; he most cheerfully consented.

The whole taken together is like a dream, where the imagination is being influenced by external impressions, as well as by impressions previously received, both however being constantly influenced by that very characteristick symptom of insanity, a certain degree of correctness of perception and of consciousness.

As my chief object in sending this singular document to the press, is to give my reader an original specimen of the hallucinations of a deranged mind, as well as to draw from it practical inferences; I have not deemed it necessary to extract more than would suffice for these purposes, as it would only be a variety of the specimens I have given.

The great difficulty and obscurity that yet impede

and hang over the rational treatment of the insane, I doubt not will some day be in a considerable degree removed; and I firmly believe they would have been comparatively dissipated, had the professional body given its mind to investigate this disorder with the same honourable zeal, which it has evinced in investigating others. But, till of late, a strange apathy has possessed the great mass of the medical profession on this subject; and even now, he who devotes his talents to its investigation and treatment, seems to be occupied in a pursuit of doubtful reputation; and to be placed in the lowest cast of the medical profession! Strange that the judicious exercise of a branch of the profession which requires for the due performance of its duties all the best qualities of the head and of the heart, and information the most extensive, should be thus undervalued. Strange that it is so now, but not strange that it has been; for the gross ignorance of the profession itself, only a short time since, as to the proper treatment of this disease, had consigned its miserable victims to the care of the ignorant and brutal; and hence, in all probability, has arisen that contemptuous neglect of this difficult department of the practice of physic. I venture, however, to hope that with the present improved and improving knowledge, not only of medical men, but of others in the higher ranks of society, on this subject, a more just, and consequently a more liberal and more honourable cast, will be accorded to the skilful practitioner in this department of the medical profession; and I strenuously urge this concession, because I am satisfied, both from my own observation and the observations of others, that great

loss of life, and of intellect, and that much, very much of the misery the lunatic has suffered, has arisen from the withholding it. For is it not the fact, that the medical man of superior education and respectable connexions, shrinks from the occupation, because it will degrade him in his professional career; and hence do we not find that only accidental circumstances will induce him to embrace this particular branch of practice? Such as the appointment to a public hospital, or the succession to a lucrative private establishment. I therefore trust, that the public at large, and every medical gentleman in particular, will, with me, recognise the propriety, and as regards the lunatic patient, the humanity, of assigning to the regular medical practitioner, who devotes his time and talents to the treatment of the insane, at least no degraded rank in the professional body.

Glossop, near Manchester,
December, 1826.

ON THE

DERANGEMENT OF THE MIND.

PATHOLOGICAL & PHYSIOLOGICAL OBSERVATIONS.

THE proximate cause of derangement of the mind has been considered by many learned men to be some diseased action of the nerves. The opinions of a man, which are still frequently quoted, after the lapse of more than two thousand years, cannot fail to command our most serious attention. Hippocrates asserts that the humours of the brain sometimes become acrid and corrosive, that the system is much disturbed, the whole body affected, and that the *mind is thereby deranged.** "The nerves of phrenetic patients are principally affected, the fever is continual," says Aretæus. "It is indeed very likely

* Lib. de Morb. Sacr. p. 354.—See the Miscellaneous Remarks, towards the conclusion of the volume. Art. "Hydrothorax."

that phrenitis is occasioned by an excitement of the spirits, rather than by an inflamation of the brain" (*Willis, Cap. X. de delirio et phrenitide,*)—Dr. Alexr. Crichton (Vol. I. p. 168,) suggests, that all impressions, conveyed to and from the brain, in phrenzy and deliria, must arise from a peculiar morbid action of the vessels which secrete the nervous fluid. The learned, accurate, and modest Cullen, also, considers the proximate cause of derangement of the mind to be a peculiar state of the nervous system. From facts which have repeatedly occurred in my own practice, or rather from witnessing the effects of the practice of others, I am induced fully to concur in this doctrine. These facts will be noticed, when I come to the treatment of the disorder.

I have no hesitation to declare my firm conviction, that in every case of deranged intellect the disease proceeds immediately from corporeal disorder, and at the same time I am equally well satisfied, that the structures of various human frames differ greatly in the susceptibility of this influence on the intellect; but in what this susceptibility consists, I am quite ignorant. The immense number of anatomical investigations, that have been prosecuted for many ages, have thrown no light upon this most intricate subject. I have myself examined

many bodies of persons, who have died in a state of lunacy, and although I have not found any morbid appearances, that are not frequently met with in bodies where insanity had never been manifested, yet I think I have observed that there has been greater turgescence of blood-vessels, and more copious effusion of blood—in fact, greater evidence of an excessive vascular action, in the brains of insane subjects, than would have remained under the same system of depletory treatment in the same subject, had he been sane, and died sane:—and this I do consider a most important fact. As no other morbid appearances have been noticed in those who have died insane, that have not also been noticed in those who have died sane, with the exception of the hard elastic brain in the old maniac, I shall refrain from noticing them.*

There seems no probability of elucidating the proximate cause of insanity, except by a series of anatomical investigations of the bodies, as well as of the heads, of persons whose families have been known to have been frequently afflicted with this disorder. This might perhaps be effected in some of the large Hospitals for luna-

* Those who wish to see, what has been effected by morbid anatomy may consult the Appendix to "An Inquiry into the Nature and Origin of Mental Derangement, &c." by Alexander Crichton, M. D. &c. Vol. ii. p. 349, et seq.—Ed. 1798.

tics on the continent, particularly in Paris. I am not aware, that any such investigations have ever been prosecuted, with the view to elucidate the peculiar structure that renders one body more susceptible than another of the disorder that causes insanity. It seems not improbable that a knowledge of this peculiarity may lead to important results; for that such peculiarity exists, all analogy justifies the conclusion:—since it is a melancholy fact, that the individuals of some families, from generation to generation, shew a much greater susceptibility of the affection than others; and it is equally true, that some families have *visible* peculiarities of structure that descend from generation to generation—a singular case of which was, some years since, read to the Royal Society by Sir Anthony Carlisle, and may now be met with in the Philosophical Transactions. Facts bearing immediately on this question, and illustrative and confirmatory of it, are so numerous, that I shall not take up my readers, time with adducing instances, as doubtless his own observations will have furnished him with many. Strong circumstantial evidence, therefore, forces the conclusion, that hereditary predisposition to insanity is the result of peculiarity of structure—something in the machinery, with which the living principle acts, being defective.

And here I would draw a strong and distinct line of demarcation between what is called hereditary, and not hereditary, insanity. Adventitious circumstances sometimes concur, and produce insanity in persons, previously, and subsequently, of sound intellect, and healthy frames. If the predecessors of such persons have been free from insanity, I have not known a well authenticated instance of the disorder being transmitted; and therefore I do not consider such event any well grounded objection to an alliance with the individual: much less do I consider it a well grounded objection to an alliance with the family.

Melancholy indeed is the conviction, that the intellect of a beloved relative is deranged; but how much more gloomy must the conviction be that such derangement is a taint in the blood of the family. Should any one peruse these pages on whom an affliction so melancholy, so wretched, has fallen, as the conviction, that the derangement of a relative, a father, mother, sister, or brother, is evidence of a taint in the blood of his family; let me hope, that this my firm belief, after many years of extensive experience, and very close observation, may be an alleviation to his heart, and cheer him from despondency. My knowledge, I trust I do not speak it vainly, has not been acquired in a cor-

ner, nor is my treatment of the insane unknown.

Although it is not in the dissecting room that the movements of the brain can be investigated, yet may we not thence fetch materials to give us some notion of the cause of *sensation, produced by the action of reflection?* It has been well observed by an eminent moral philosopher, that when we reflect, or are endeavouring to recollect, we are conscious of some movement—of an act, or series of acts, within the cavity of the cranium, as though hunting about among our thoughts.* And who has not, when tossing on the restless couch, anxiously courting sleep, experienced the tranquillizing sensation of sleep stealing over him, felt his brain gradually relieved from the busy throng that has crowded there, felt as though its energy had relaxed, and the power that had *pressed* it to action had ceased—that is, felt he was tranquilly falling asleep, and then suddenly been roused by all the sensations of thought renewed, in fact by a return of the *pressure?* I reason thus, *reluctantly*, because I wish to avoid, as much as possible, Psycological questions; but it appears to me impossible to arrive at any idea of the actions, by which the energies of the mind are developed, by any

* See Aristotle de Memor. et Reminiscent. c. i. p. 680. Dr. Gillie's New Analysis of Aristotle's Works.

more satisfactory process. I relate what, I think, I have felt myself too often, and noticed too often, to be mistaken about: my candid and intelligent reader will know if he experiences similar sensations. Reasoning from these premises, I am led to believe, that the intellect is *developed* by *pressure, which, in the sane, can for the most part be exerted at will; but, in the insane, acts independently of any voluntary movement*; but how this pressure is produced in the healthy subject, what is its proximate cause, I know not: certainly it is not any turgescence in the blood-vessels. I consider the soul to be the remote cause of all the phenomina of mind:—this is my belief.

SYMPTOMS OF INSANITY.

The only symptoms that I know, peculiar to insanity, are *a confusion in the intellect, with some degree of correctness of perception and consciousness; the confusion being frequently, in the early stage of the disorder, manifested more by actions than words.* This confusion may arise from an error in one perception or in all, in one

conception or in all, in a total or only a partial forgetfulness. I offer the following cases in illustration, collected from a very scanty portion of the notes of my own practice: I condense them into the smallest possible space.

Error in Conception.

Henry Williams conceived himself to be a fatted sheep, and in every jolly rosy-faced man that visited the Asylum, he perceived the butcher that was about to lead him to the slaughter-house. The first time I detected this state of mind, I saw him crouched in a corner of the gallery, staring wildly, looking pale as death, and trembling excessively. A jovial good-tempered justice of the peace was the cause of this horrible suspense and terror:— the lunatic could remember the usually hale and healthy look of the butcher, but yet could not recollect that he himself was not a fatted sheep.

Errors in Perception.

Jane Winstanley was perfectly convinced, that she frequently heard, saw, and conversed with a man who was not in existence; yet she was so rational on most subjects, that an unskilful person might be excused if he thought her sane.

James Harrison, when in Liverpool, saw the devil perched upon the dome of the town-hall. He was not black, as people have erroneously imagined, but yellow; the Liverpool women too had green eyes: yet he boasted, with some little reason, of his skill in arithmetic.

Error in Conception.

H. W. was many months firmly convinced that he had a mouse in his throat, and would gape to any one to have it pulled out by the tail, which he was thoroughly convinced was at the root of his tongue; yet he would correctly execute an errand.

Jane Manning, an old maniac, seemed to have no perception, or consciousness of persons, language, or things.

Error in Conception and Memory.

Mr. ——, would talk rationally, intelligently, and even eloquently for a few minutes, but if suffered to proceed, his ideas acquired, as it were a geometrical progression, and he would excite astonishment by the rapidity of his utterance, vivid conception, preposterous distortion of facts, and wild and erroneous conclusions.

Error in Perception, or Judgment.

William Rydall, the man who attempted the life of Mr. Horrocks, the member for Preston, was wild and visionary in his ideas, peremptory and obstinate in his conclusions, and argued vehemently, both before, and at his trial, to prove that self-preservation justified the step he had taken. I officially examined this man, and attended his trial, but he did not appear to me, after the strictest judgment I could exercise, to come within that degree of insanity required by the law. In my private examination of him, he went freely into a statement of the disputes between the cotton masters and their men. He told me, some lawyers had been with him not long before, to try what they could get out of him, but, said he, "I knew they were lawyers: they came to pump me, to play upon me, as Guildenstern would on Hamlet; they would seem to know my stops, pluck out the heart of my mystery, sound me from my lowest note to the top of my compass; they thought I was easier played on than a pipe, they fretted me, but they could not play upon me." He then entered into a very pleasing, and animated conversation, on the play of Hamlet, in which he shewed much memory and taste. Yet with all this, he was not, in the abstract, a sane man. The symptoms of disordered

intellect were, an inflexible pertinacity in maintaining that his conclusions were right, without dispassionately examining his proofs, and a flighty and reckless determination to abide by those conclusions, although it led to attempting the life of an individual, against whom he had no *personal* animosity, and whom he acknowledged to be a kind master, and, abstractedly, a very good man.

Confusion, manifested by Action.

Mary Ward for several days appeared so rational in conversation that I could not pronounce her to be insane, but when walking with her back towards me, she would swing out the right leg, and cut the first step in dancing. I inquired if this was a habit in her, and was informed that it had only been noticed a few days. Coupling this with a certain degree of unusual, though very slight levity, I was satisfied she was deranged in mind. In about a week after she had an attack of the high state of insanity. In this instance the actions, and altered manner, indicated insanity, though the language did not.

In the Medico-Chirurgical Review, for September, 1820, I find this quotation from the celebrated Dr. Esquirol's paper on Insanity, in the Dictionnaire des Sciences Medicales. "In

mental derangement, the sense of delicacy is obliterated; and people of the finest previous feelings will deliver themselves up to the most indecent and culpable actions, without the consciousness of impropriety."

I believe it will be correct to construe this description as meant to be *generally, if not always*, applicable, and presuming I am borne out in this construction, I feel it my duty to declare, that my experience will by no means enable me to bear testimony to its accuracy, more especially as this statement cannot be meant to apply to those extreme and comparatively rare cases of insanity, where all, or nearly all consciousness is obliterated, nor to those where the characteristic symptom of the disease is extreme concupiscence, because the Dr. presumes an option, an act of volition, on the part of the lunatics. Now amongst this class, I mean those who on many subjects exercise a tolerably sound judgment, conformably to the rule I prescribe to myself, I must declare that such conduct has been *very rarely* met with in the patients I have treated; but on the contrary much propriety and decency of deportment: and I again refer the sceptical to the records before spoken of, and I think I may also safely add, to the testimony of the multitude of respectable persons in the north of England, who have wit-

nessed the conduct of the patients under my care. I can easily conceive that a numerous body of men or women, *sane, or insane,* feeling themselves coerced from society, and shut up together, may, by an improper system of moral treatment, be induced to become exceedingly licentious, and that too without the intervention of the opposite sex; but I should regard such general licentiousness, as indisputable evidence of bad, very bad, moral management, because I know from very ample experience, that the insane, even in large bodies, will under the kindest treatment, conduct themselves with as much modesty, as any sane persons of the same class in society would individually, and much more modestly than, I have ample reason to believe, those same individuals would have done, if similarly congregated in a sane state. I have no doubt, that generally in the insane the sexual passion is in a state of abeyance, more particularly in the man.

Much has been said too by the same eminent author, and numerous others of minor note, of the pusillanimity of the insane. On this symptom I shall venture to lay down the following aphorism.

The inevitable result of insanity is infirmity of purpose, and the equally inevitable result of infirmity of purpose is its near relative, pusilla-

nimity; to which I may add, discontent—the besetting misery of the insane: and the immense vituperative mass that has been said and written, of the cowardice, ingratitude, dissimulation, and especially discontent of the insane, may, I humbly conceive, be much better, because more fairly, more clearly, and briefly, comprised in this sentence:—Insanity begets infirmity of purpose; infirmity of purpose begets pusillanimity and discontent. I have frequently noticed, that the first symptom of returning sanity has been a diminution of discontent.

I purposely refrain from giving any general, or particular description of what has been termed delirium, mental derangement, insanity, the high state, the low state, mania, monomania, &c. &c. because these appear to me shades only in the same disease, lead to no curative knowledge, that may not be more certainly and more easily ascertained, by a more simple method, and because these descriptions, to the inexperienced, partaking of the deep interest of solemn facts, in the garb of powerful romance, or fiction, are calculated to lead the enquirer into a labyrinth of useless research amongst the *effects*, whilst he loses sight of the *causes:* which I conceive will be better understood by the method I shall suggest in the following chapter. But as I am so unfortunate as to differ with Doc-

tors Robert Darling Willis and Francis Willis, respecting the definition of delirium, into which mental derangement and insanity, as defined by Drs. Willis, sometimes pass, and *vice versa*, I deem it due, from respect and deference to their authority, and also in justice to myself, to explain, why I question their pathology; but more especially I consider it a duty I owe to the public, as I am convinced that a pathological question of very great importance depends upon it.

Dr. Robert Darling Willis in his examination before the Committee of the House of Commons thus describes *delirium*.

"In *delirium* the mind is actively employed upon past impressions, upon objects and former scenes, which rapidly pass in succession before the mind, resembling in that case a person talking in his sleep: there is also a considerable disturbance in the general constitution, great restlessness, great want of sleep, and a total unconsciousness of surrounding objects. In insanity, there may be little or no disturbance apparently in the general constitution; the mind is occupied upon some fixed assumed idea, to the truth of which it will pertinaciously adhere, in opposition to the plainest evidence of its fallacy,

and the individual is always acting upon that false impression."

" In insanity also, the mind is awake to the objects which are present. Taking insanity, therefore, and delirium, as two points, I would place *derangement of mind somewhere between* them." What Dr. Willis terms insanity, appears to be strictly that species of insanity termed by some nosologists—monomania.

I confess the whole of this, as adduced by Dr. F. Willis, appears to me useless and calculated to mislead. The delirium described by Dr. R. D. Willis, and adopted by Dr. F. Willis, I have only seen in fevers of the typhoid type: I have never seen such delirium pass into insanity, nor alternate with it. I shall not in the face of such high authority assert that it does not occur, but I can truly say, that I have witnessed many hundred cases of *delirium*, where *a total unconsciousness of surrounding objects* was a prominent character, but that every one of these either terminated in a few days, or at most three or four weeks, with the subsidence of bodily disease, and restoration to sanity, or in death; and I can also truly say, that I have seen many cases where the mind was in the state so well described by Doctor Crichton, (Vol. i. p. 160 and 161,) and which I shall presently quote,

and that it was always accompanied by *some degree of correctness of perception and consciousness;* and that this delirium, which if I were to name it, I should call "*raving madness,*" has terminated in what Dr. F. Willis calls mental derangement,* and also in insanity. But I cannot avoid the belief, that Dr. Francis Willis differs in opinion with his relation Dr. R. D. Willis, because, after quoting Dr. Monro's animated and accurate description of the high state, Dr. F. Willis proceeds to say:—

"To constitute derangement of the mind, his aberrations must be attended with bodily indisposition. If the latter be not apparent, the chance of cure is hereby diminished; the case then partaking more of insanity than derangement. If, on the other hand, the symptoms of bodily indisposition encrease, *delirium* ensues, and then the patient† begins to rave, and talk wildly and incoherently, swears as if in the most violent rage, and then, immediately after, bursts out into fits of laughter, talks obscenely, directs offensive and contemptuous language against his relations, and those around him, spits at them, destroys every thing that comes in his way, emits loud and discordant screams,

* A Treatise on Mental Derangement, by Francis Willis, M. D. p. 45.

† Dr. F. Willis, as before, p. 50 and 51.

and continues in this way till he is quite exhausted. The state of rest which follows, is generally short and sleepless; *the patient is obstinate, will not* speak one word, clenches his teeth if any thing is offered him to swallow; or else, *with a degree of cunning, he pretends* to drink a little, but immediately spirts it out again on the person that offered it. At once, however, he again breaks out into all the wild and extravagant language and actions he committed before. If kept in strict coercion, *he has often so much command over himself as to behave mildly and modestly; and were it not for the general expression of his countenance, and the peculiar glistening appearance and rapid movement of his eyes, he might impose on many of the bye-standers, and make them imagine the state of phrenzy was over.*"* I have marked with italics that part of this definition of delirium that makes for my argument. Dr. Crichton says not one word of the total unconsciousness of surrounding objects, but on the contrary he says, that the patient has "often so much command over himself as to behave mildly and modestly, even so as to impose on many of the bye-standers, and make them imagine that the state of phrenzy is over," which description precisely corres-

* See vol. i. p. 160 and 161, of "An inquiry into the nature and origin of Mental Derangement," by Alexander Crichton, M. D. and Dr. F. Willis as before, p. 50 and 51.

ponds with my own experience, and with the definition I have given of the peculiar symptoms of insanity, namely,—"A confusion in the intellect, with some degree of correctness of perception and consciousness."

I will ask, is it not this degree of correctness of perception, and consciousness, that enables the lunatic to assume so much command over himself, as to behave so modestly, and mildly, as to impose on many of the bye-standers, as Dr. Alexander Crichton, and after him, Dr. Francis Willis, have very correctly observed. The very act shews not only a consciousness, but a capability of great mental effort; probably, equal to any the sane mind is called on to make. The insane man is impelled by powerful emotions, by equally powerful convictions; he perceives, that neither his emotions, nor convictions, are regarded by the bye-standers, in the light in which he regards them. Nevertheless, he is equally actuated by the one, and influenced by the other; and with the determination to yield to both, he assumes a conduct in direct violation of his own powerful emotions, and convictions, for the express purpose of deceiving others, that he may the more readily effect his object. And it is this peculiar character of insanity, that enables the lunatic to impose on so many injudicious, but

well-meaning persons, who occasionally visit his abode. They hear a man talk rationally, see him act rationally, and being positively more ignorant than the lunatic himself of the drama before them, pronounce him sane, to the delight of the lunatic, who exults in his ingenuity, and slyly laughs at his auditor.

I certainly entered on this criticism with much reluctance. I was anxious not to be opposed to authorities, to whose accuracy, and valuable practical knowledge I have great pleasure in offering my humble, but, cordial testimony; but as I have prescribed a solemn duty to myself, I shall endeavour to perform it.

If I mistake not, I have shewn, that Dr. Crichton is unequivocally of opinion, that in the delirious stage of insanity, there is not a total absence of consciousness; and as he is the authority quoted by Dr. Francis Willis himself, I infer that he adopts Dr. C.'s description, and, consequently, that he will recognise the correctness of my definition; and the pathological question of great importance, which I have to submit to the test of future experience, is this:—That *a total unconsciousness in delirium* more particularly characterises the delirium of fevers, particularly typhus, and that *some degree of correctness of perception and consciousness* characterises the delirium of insanity.

OF THE CAUSES OF INSANITY.

Before I proceed to consider the causes of insanity, I shall take leave to make a few strictures on Dr. Esquirol's paper on Insanity, inserted in the Dictionnaire des Sciences Medicales. The Doctor states, that "all the phenomena of insanity shew the vast influence of the passions in this affliction. They are always impetuous, whether they be of the gay, or the sombre cast, in mania, monomania, and melancholia."

I cannot let this doctrine, coming from so high authority, pass without some observation. To me it obviously appears, that Dr. Esquirol considers the passions to have a vast influence in the production of insanity; and, as the whole of my experience goes to controvert this position, I shall submit the following observations to the consideration of my readers, by which, I think, we shall be able to judge in what degree the passions exert an influence in the *production* of insanity. First, if the passions exert an

influence in the production of insanity, we must look for *their manifestation, prior* to the manifestation of insanity: for if the passions have not preceded insanity, it cannot be said, that the passions exert a vast influence in the production of insanity, but, on the contrary, that all the phenomena of the passions shew the vast influence of insanity *on them.*

Secondly, the apoplectic diathesis is generally accompanied with a peculiar irritability of temper; yet would it be correct to say, that all the phenomena of paralysis and apoplexy shew the vast influence of irritability of temper in this disease? Every experienced medical practitioner is aware, that in this latter disorder, there are anterior causes, evinced by corporeal symptoms, which exert the prior, and, frequently, the whole influence in the production of paralysis, and apoplexy; and although great *irritability of temper* shall *precede,* and accompany the attack, yet no one, I presume, would, in the present day, attribute the disease to irritability of temper, but the irritability of temper to the preceding disorder of the body. Doubtless, the excitement of the passions in the one case, and the irritability of temper in the other, (a minor degree of excitement,) both proceed from corporeal causes, and are merely symptomatic; but these symptoms,

like all others, if neglected, or injudiciously treated, may be aggravated so as to render them prominently characteristic. Of about three hundred lunatics at one time under my care, with the exception of five or six irascible patients, not one could be said to be labouring under a vast influence of the passions:—I mean, under such a degree, that the passions, or some one passion, should be the predominant characteristic of the insanity,—as they would be, if they exert a vast influence in the affliction. I am well aware, however, that by injudicious treatment, some particular passions, as anger, fear, love, pride, fury, at a particular word, or gesture, sound, or name, &c. *may be generated and cherished*, so as to become a predominant feature* in the deranged intellect. The astonishment, and I am sorry to add, the amusement, which the vulgar and ignorant

* I once witnessed a very whimsical origin of the passion of pride, which bears immediately on this question. One of my patients, Wm. Y. who, on general subjects, possessed a most retentive memory, had forgotten that this is not the age of miracles. It chanced, that one William Faulkner, a quiet, inoffensive, meek and rather melancholy lunatic, was placed in the same range of apartments with Y. who took an early opportunity to question me respecting this *personage*, as he called him. I told him all I knew about Faulkner. He eyed me with suspicion and derision, and after a short pause he said, "If you dont know Sir, I do. I have repeatedly told you, that I had seen his Majesty's person in the

manifest at these eccentric phenomena, is an inducement with persons, ignorant and vulgar like themselves, to excite them: but I confidently assert, that any violence of the passions is only one of many symptoms—that they are the passive, and not the active agents; and in general, when the delirious stage has subsided, may be easily removed; and if permitted to continue, the treatment is injudicious. I ven-

clouds, in broad day-light, when I was walking the streets of Liverpool. (It was true, he had repeatedly mentioned this.) "Of course," Mr.Y. continued, "a phenomenon so extraordinary excited my astonishment, and roused my attention. I now understand, wherefore this vision was vouchsafed to me. The features were too strongly impressed upon my mind, ever to be forgotten; and this personage, who, for some diabolical and traitorous purpose, is called William Faulkner, is no less than his Majesty; and it is impossible, Sir, but that you must be well aware of the fact." So saying, in the most respectful and distant manner, bowing to the ground again and again, as he approached, and sidling round, that his back might be at no time towards *the presence,* he greeted W. T. with "I humbly, but most sincerely hope, your gracious Majesty is well," bowing again to the ground. His gracious Majesty cast a look of curiosity at his very humble and loyal subject, regarded him a moment, and then quietly and meekly resumed his walk. His subject, however, had a suit to prefer; and following, bowing, scraping, and sidling round, which produced a very comical effect, he entered on the history of his cruel and unjust confinement, counting the weeks, days, and even the hours he had been confined, which he could always do, and concluding, by most humbly, but most earnestly beseeching, that his Majesty would peremptorily order his liberation. During this address, which was well spoken, I observed the drooping William Faulkner gradually draw

ture to assert, that the great number of highly respectable persons, comprising many of the higher order in the north of England, who have frequently visited, and have had nearly free access to the patients under my care, have never witnessed any great exhibition of the passions, except in a few comparatively solitary instances; much less have they found, that all the phenomena of insanity shew the vast influence of the passions in this affliction, or that they were always impetuous, whether of the gay, or the sombre cast; but, on the contrary, that the characteristic deportment of the mass of the patients was tranquil. As confirmatory of this fact, I may, perhaps, with propriety, here state, that of about 120 insane women, who were at the same time under my care, on an average, *not*

himself up, and at the conclusion, to my astonishment, he replied, with an air of dignity, rather bombastic, " My good fellow, I am sorry I can be of no use to you—my enemies confine me here."—" But if your gracious Majesty would be only pleased to direct to this person, pointing to myself, your royal order, under your sign manuel, the gates would at once fly open."—" My man," his Majesty replied," you are mistaken : I am, I tell you, confined here by my enemies, and I cannot at present, in this place, command any thing. I sincerely wish I could help you, but I assure you, it is out of my power:" so saying, he walked off, with all the air and dignity imaginable; pride took possession of his breast, and to the day of his death, he called himself a king.

more than *three or four* were confined, or coerced, *on account of being violent*, and not more than ten or twelve, on any account whatever; and of about 130 men, who were in the same establishment, on an average, not more than *two or three* were confined or coerced, *on account of being violent*, and not more than ten or twelve on any account whatever. These are facts so well known, that they will not, I presume, be questioned, since they have been so repeatedly witnessed by the many hundreds of highly respectable persons before alluded to, of whose powerful testimony I stand, I fear, in need, since it is stated, in the official report, relative to the hospitals in Paris, that *the proportion of females who are violent has always been greater than that of those who who have been calm.** This statement is to me very surprising. Can this proportion of the violent to the calm be the effect of one of two causes, or of both; that is, of national character, or treatment, or of a combination of these two. I infer it is one or the other, because I am not aware that insanity has produced the same effect elsewhere. I will not say it results

* Report on the present state and management of the hospitals, for insane persons, at Paris, 1817.—Page 36.

from an error in treatment, nor can I imagine any national character would produce the effect: but this extraordinary difference in the calm or violent state of the patients is not more striking, or more at variance with the results of my practice, than are the causes of insanity, as assigned by some physicians, and in Paris particularly. The violent, or the calm state of the patient, is always so palpable, that amongst a large number of lunatics, the most ignorant observer may at once ascertain, whether the majority are violent, or only a few.

As this Paris report contains tables of classification of cases of insanity, in two of the largest hospitals for lunatics in the world, I shall take this opportunity of making a few remarks upon them, and expose, what I conceive to be the fallacy of the method, because I am convinced, it must lead to much misconception respecting the influence of moral causes, and because I am satisfied that if there is a general belief in this frightful influence of moral causes, the effect will thereby be more frequently produced, especially in the higher orders of society, and amongst persons of great susceptibility.

Respecting the influence of moral causes, we meet in the report referred to, which is official, with tables of admissions and discharges, together with the assigned causes of the disorder,

and observations on them, both from the Bicêtre, and La Salpêtrière. The Bicêtre is for men, and La Salpêtrière for women; the former attended by M. Hebréard, and the latter by M. Esquirol, both celebrated physicians, from whom these tables, with the observations, have proceeded. I shall extract all the cases of insanity, classed by these gentlemen under the head of moral causes, from the year 1807 to 1813, inclusive.

In the Bicêtre, of 1578 men, 409 are said to have been driven mad by moral causes, that is

By Religion.....	55
Ambition.....	78
Love.....	37
Misfortune	116
Political Events.....	24
Trouble.....	99
	409

Being less than 2 in 7, or 1 in every 3 $\frac{351}{409}$.

In La Salpêtrière, of 1940 women, 580 are said to have been driven mad by moral causes, that is

By Religious excess.....	20
Love, crosses in.....	122

Reverses of fortune & misery.	96
Political errors.....	15
Domestic trouble.....	216
Anger.....	20
Fear	64
Effects of conscription & war.	27
	508

Being more than 2 in 7, or 1 in every 3 $\frac{200}{580}$.

I shall now take leave to make a few observations on these tables, as contrasted with each other. In France, it would seem that Religion is rather a fruitful source of insanity, and that religious enthusiasm affects the man more than the woman, in the proportion of above three to one; that Ambition, a laudable passion, and very frequently one that affords great mental enjoyment, drives a considerable number of men in France mad, but does not derange the intellect of one woman; but on the other hand, that *Pride*, a master passion often extremely harassing to the mind, seems to be innoxious, both to man and woman—which must be regarded as very singular, since so many minor causes, that is, subordinate passions, appear to be so extremely baneful to the intellect: for

"Pride hath no other glass
To shew itself, but pride."—SHAKESPEAR.

and again, because it is not uncommon to meet with persons, in England at least, influenced by

> " Vain aims, inordinate desires,
> " Blown up with high conceits, engendering pride."
>
> MILTON.

And yet of about a thousand men and women, said to be driven mad by moral causes, not one is affected by *Pride!* Love, (unrequited love I presume,) affects the man a little, and plays the duce with the woman: I should not have expected this. Grief, seems to have a large share in the production of all this mischief, for I conceive, that Misfortune, Reverse of Fortune, and Misery, all refer to grief. Political Events is a term so indefinite, that it leaves us perfectly in the dark, as to its moral effect on the mind. This may be terror, or joy, as moral causes, or the causes may be purely physical, as from fatigue, privation of food, and the thousand exciting vicissitudes of a campaign. If Political Events is objectionable, what can we say to Political Errors? This is still more perplexing, because it is not impossible, perhaps not improbable, that what one calls *political errors*, another may consider to be *political wisdom*. Is it not strange, that such terms should have been used in a classification of moral causes, said to have dethroned the reason of man? I am, however, disposed to look on this

as a sample, by which we may judge of the whole classification of moral causes, and by which we may judge of the degree of perspicuity and accuracy, or may I say, confusion and inaccuracy, with which they are ascertained and defined. But passing on, we come to *Domestic Troubles*, which exceed in their baneful effects the mischief of *Love* nearly two-fold. This is some consolation for that very amiable class of women, sneeringly called old maids, as well as for that much less respectable class, the old bachelors. If then men suffer from ambition, they wholly escape the baneful effects of both anger and fear, the latter of which I suppose, must include terror. Not so the women, who, with all their gentleness, have, we must conclude, some sad vixens among them, for of 1740, twenty are officially reported to have gone mad through anger. To speak more seriously, an attentive consideration of these tables of classification has by no means weakened my opinion, respecting the very few cases of insanity, that are absolutely produced by moral causes. I do not, however, question, much less do I deny, the effect of moral causes on the body, especially if the body be in any way disordered, both in accelerating disease, and in removing it. I am fully convinced, as my observations on moral treatment will, I trust,

clearly shew, that the abuse or excess of moral causes tends as powerfully to weaken, as, on the contrary, their due exercise does to strengthen the intellect; indeed they operate on the body so palpably, as constantly to affect wounds, when the influence on the mind is powerful, as every experienced surgeon must have witnessed; and this fact is so well known, that I must beg my professional reader will excuse me for mentioning it. Nevertheless, I cannot concede, that moral causes frequently, or even rarely, possess the tremendous power of upturning reason. The tables I have quoted, vague, and unsatisfactory as they are, strengthen my conviction of the infrequency of moral causes producing insanity.

In considering the causes of insanity, I shall endeavour to shew, that it is either a disorder sui generis, or a SYMPTOM only of many diseases.

OF THE MORAL CAUSES OF INSANITY.

"All our direct knowledge originates in perceptions of sense."
Aristotle, Book iii. c. ix. p. 656.

Insanity, like some other diseases, may have for its origin a moral, or a physical cause;

either an affection of the mind, or a disorder of the body. The moral impulses, however, very rarely produce insanity, and this is also the case with regard to religious feelings. I come to this conclusion, because of nearly seven hundred cases of insanity that I have sedulously treated, I have only *once* ascertained, with that clearness, which I think the importance of the the subject required, namely, unquestionable proof, that either a religious or a moral cause produced the disorder. 'Tis true, I have frequently been informed, that this, and the other person, became religiously insane, through following some sect not connected with the narrator's persuasion; but when it has been possible to get an intelligent history of the person, I have uniformly found, that the individual had betrayed at least equivocal symptoms of insanity, and that derangement of the mind, though not palpable, had obviously existed, before he became a raving devotee; and doubtless from this state of mind, has arisen that proneness to change his mode of worship, so frequently noticed *in him*, who is, what is termed religiously insane—not that the change in his mode of worship has caused the insanity, as has been, I think, erroneously stated; but that the incipient insanity has caused the fickleness in devotion, together, probably, with an

unusual fervour, which, if urged on by an erroneous zeal, as it too often is in these cases, may, and doubtless very frequently does, assume the impression given to it—whether that be of the usual gloomy cast, or whether it be of a lively and amorous character, as I have sometimes seen it. As this latter is rather a rare species, of what is termed religious insanity, I shall make a few extracts in illustration of it, from one of my journals, which I fortunately possess.—October 11th, 1823, Elizabeth A. a lusty young woman, admitted this day.—Oct. 17th, she pointed out to me the 5th chapter of Ephesians, and said she was reading an exhortation to love, her manner and expression of countenance corresponding to the sensual import of the passion. Another time, she pointed out the 2nd chapter, 5th verse, of Solomon, and with voluptuous expression quoted these words:—" He took me to the banqueting house, and his banner over me was love." She was always talking on religious subjects; and she had hymn-books, wherein the passion of love was too warmly pourtrayed, as I conceive, to be suited to its professed object: many of these she had by heart, and would sing to the tune of profane airs, with all the expressions of an amorous passion.

Similar observations may be made respect-

ing the other passions, owing their origin to corporeal disorder. Terror, however, claims particular notice, as it has doubtless, by its violent and sudden action, frequently produced instantaneous insanity; and perhaps more frequently than all the other passions combined; and insanity from this cause is the only one resulting from the passions which I have satisfactorily ascertained. It was shortly this.—Some household concerns induced a mother to leave her infant without any competent person to attend to it. On her return, the shrieks of the infant made her rush to its protection; it was writhing on the floor dreadfully burnt: she sprang forward, and with her hands crushed the flames. Here was a horrid spectacle!—the infant was dead,—the mother deranged.

How it has happened, that in my practice, of nearly seven hundred insane patients, the malady of only one was ascertained to be undoubtedly, the effect of a moral cause, I will not attempt to decide, though I may endeavour to account for it.

I presume, my means of gaining information were on a par with those which occurred to other persons. When I was precluded the advantage of actual observation, printed queries were transmitted to the medical person, certifying the insanity, and also to the relatives or

acquaintance of the patient; and although both the medical persons and others were frequently very ready to assign a religious or a moral cause for the disorder, yet, on a closer investigation, it turned out, that they were either not acquainted with the patient, so as to notice if his actions or language were altered, before the derangement of intellect obviously developed itself; or they disclosed circumstances, that manifestly indicated an aberration of intellect, long before the excitement of a religious, or moral cause, gave it an impulse, and a decided character, too clear even for ignorance to mistake. I consider, therefore, that Religion and the Passions very rarely indeed *cause* insanity; but on the contrary, that an over zeal for religion, or a violent excitement of some one of the passions, is frequently the inevitable result of the corporeal affections; by which affections the mind is constantly influenced in the insane, as well as the sane part of mankind. If any one doubts this, let him examine and contemplate the state of his own mind at various times, as acting under the influence of corporeal excitement or depression. Happy, indeed, is his constitution, if the retrospect does not make him ashamed, if not tremble, for the follies, the misanthropy, perhaps the vice it has led him to contemplate, if not to commit!

If thus, when the corporeal organs are only exercising a vigorous discharge of their functions, or when they have become sluggish through some error in the system, although such state of body is not perceived by others, and probably not *duly* appreciated by the individual himself, the mind shall fall into a state of aberration, so far from sound judgment as to lead to the most distressing results, is it not legitimate to conclude, that some corporeal affection, latent or evident, is almost always the root of deranged intellect. For I may ask, is it possible to say with precision, where is the line of demarcation between an aberration from sound judgment and derangement of the mind? I appeal to the experience of mankind for confirmation of the fact, that the corporeal sensations and functions exercise a constant influence on the mind. The man born blind, though of sound intellect, thought the colour of scarlet must bear a strong resemblance to the sound of a trumpet. If this confusion could exist in a man of perfect intellect, through his being of imperfect corporeal sensation, can it be matter of surprise, if a man who has possessed all the organs of sensation, and the functions of his body perfect, should become alarmed and confused, when his sensations convey new and unaccountable impressions, as they

undoubtedly very often, and perhaps always, do in the insane. The patient will not unfrequently express his apprehension of the change in his sensations.

With ideas unsettled, arising from the deseased action of the organs of sensation, by which the direct perceptions are made to convey false images to the mind; with the passions excited, probably arising from locally encreased arterial action; and the intellect thus led astray and bewildered, but as yet conscious of the confusion that is passing within, can it produce surprise, if Religion should be the harbour to which the terrified and wretched victim flies for refuge and for succour! On the other hand, are the amatory feelings excited, straight the patient falls in love, it matters not who the object may be. The other passions obey the same law. The devotee and the lover go on, become troublesome, and too eccentric to be tolerated; and then, and not before, they are discovered to be insane, the one through love, the other through religion. This I believe to be the true history of moral and religious causes, ninety nine times out of a hundred. I shall defer what I have to say of moral treatment, till I come to the treatment of the insane generally, as the SAME MORAL MEANS under SIMILAR AFFECTIONS of the mind will be proper and

necessary, *whether the corporeal ailment be very different, or whether it be ascertained or not.*

PHYSICAL CAUSES AND TREATMENT.

Although I have thought it expedient thus to head this chapter, yet the learned reader, if such should honour me with a perusal, must not expect that I am about to attempt a history of the physical causes of insanity.

I have scarcely ever found insanity unaccompanied by one or more corporeal diseases. The skilful medical practitioner will generally be able, after one or two careful examinations, to detect the seat of considerable bodily disorder, which most probably has given origin to the derangement of the mind; and for this purpose he should avail himself of every means in his power, not relying on the statements, either of the patient or his friends, but by manual examination he should ascertain, if there is any local cause of pain, or constitutional irritation, as congestion in the liver, or partial obstructions in the bowels, or disorders of the heart, and of the lungs especially. *No symptom*

should escape the severest scrutiny; and by a cautious induction, it is probable, that the true cause of all this frightful disturbance may be ascertained. But, in his examination, the Physician must constantly keep in mind these anomalies. Though labouring under an attack of pneumonia, the lunatic will make a full inspiration, and tell him he feels no pain. With every evidence of determination of blood to the head, and intense head ache, he will tell him, he was never better in his life, &c. Whatever this disturbance may be, the general principles of medical practice are applicable, with one caution respecting blood-letting, before alluded to, and subsequently to be explained. What I have said refers to the remote cause, and its effects only: as to the proximate, or immediate cause, I cannot venture to speak with that precision the importance of the subject requires; but I am persuaded, that, as there are many remote causes, so there is more than one proximate cause; and as I have already stated, that I believe the nerves to be the chief immediate cause, by their diseased action, so I also believe, that constitutional defects, producing organic lesion of the brain itself, or its membranes, are also proximate causes; and I doubt not that the diseased action of the nerves, particularly those distributed to the carotid arteries,

and parts more immediately connected with the brain, create an encreased action of those vessels, and thus produce a determination of blood to the brain,* which by Drs. Arnold, Cox, and Mayo has been itself considered as the proximate cause of insanity. *Practice* does not give sufficient support to this opinion, and I consider this determination of blood to the head, as the effect only of the *local* nervous irritability: I shall by and bye bring forward some facts to substantiate my opinion. "Remedies which have a powerful tendency to weaken the body," says Dr. F. Willis, "are sometimes, I fear, in the worse cases of delirium, unskilfully resorted to, whether the patient be old or young, strong or weak:—whether labouring under the high or the low state of this disorder, his case is deemed a case for the lancet, or for cupping, and, erroneously I am persuaded, blood is drawn copiously from the patient. The advice of some authors concerning these measures betrays much inconsistency. While they extol blood-letting, as most beneficial in the cure,

* I have reason to think that epilepsy, unaccompanied by insanity, as well as that conjoined to insanity, is frequently, perhaps always, the result of a similar *proximate* cause. The difference seems to consist in the one case, by the disordered action being continued for a considerable period, and in the other by its being sudden, violent, and transitory.

nay even essential to the safety of the patient, they, at the same time, very forcibly demonstrate its impropriety and mischievous tendency; they shew, in fact, that the nature of the complaint forbids its use."

"Bleeding to any great extent," says Dr. Hallaran, "does not often seem to be desirable; and, except in recent cases, does not even appear to be admissible. Unless, therefore, in young persons, where the pulse stands at from 96 to 100, with a white tongue, hot skin, and suffused eye, it should not be resorted to. When these appearances are present, it will undoubtedly be found expedient, if not essential, to the safety of the patient."

"But *the great tendency in all cases of insanity to change their type and form, the great inequality of the circulation, and the subsequent torpor, even of the arterial action, accompanied sometimes with excessive debility in the most acute cases,* would establish the propriety of looking carefully for the unequivocal appearances, which would alone give a sanction to this antimaniacal remedy."*

"Where the patient is strong, and of a plethoric habit, and where the disorder has not

* "Practical Observations, &c." by Wm. Saunders Hallaran, M. D.—2nd edition, p. 73 and 74.

been of any long continuance, bleeding has been found of considerable advantage, and, as far as I have yet observed, is the MOST BENEFICIAL REMEDY that has been employed. The melancholic cases have been equally relieved with the maniacal by this mode of treatment. When the raving paroxism has continued for a considerable time, and the scalp has become unusually flaccid, or where a *stupid state* has succeeded to violence of considerable duration, no benefit has been derived from bleeding: *indeed these states are generally attended by a degree of bodily weakness, sufficient to prohibit such practice, independently of other considerations.*"* Dr. Mayo seems much perplexed to determine how to treat the maniacal paroxism, which, as far as I understand, is exactly the high state of Drs. Crichton and Willis. He says in his 3rd chapter, "*The patient is in danger from exhaustion. Depletion has a direct effect in weakening him,* AN INDIRECT EFFECT IN PREVENTING HIS WEAKNESS, by lessening excitation. These views are important, and render it very difficult to seize the point to which depletion may be carried, during the paroxism."—"It is an undoubted truth, that in fifty maniacs, labouring under the *highest degree of the sthenic* form, not

* "Observations on Madness and Melancholy," by John Harlam, p. 313.—"Hill on Insanity," p. 96.

more than from seven to ten of them will require this most powerful means of reduction of the vital power; and let it never be forgotten, that *sudden*, and profuse bleeding, is always (even in this form, however furious) highly dangerous, and never necessary."*—"Bleeding, practised as it is without rule or bounds, is found to exasperate the complaint, and to cause periodical and curable mania to degenerate into dementia or idiotism."†—"This stage does not require violent treatment: bloodletting has been much abused in it, and has produced the worst effects."‡

I have quoted some of the most celebrated and extensive practitioners in the treatment of insanity of the present day. I may have multiplied these quotations to a tedious length, both from ancient and modern authors, all tending to condemn sanguineous depletion, or expressing great apprehension of its use; but I have been more copious and particular on this head, because I have had many occasions to lament the use of the lancet by inexperienced practitioners. I fully agree with Dr. F. Willis in his observations on this practice, and earnestly recommend

* Hill, p. 287.

† "Treatise on Insanity," by Ph. Pinel, translated by D. D Davis, M. D. p. 252.

‡ M. Gorget.—De la Folie, &c. p. 316.

them to the serious consideration of practitioners, inexperienced in the treatment of insanity. In addition to what I have quoted, I must add, that in the high state, as described by Dr. Alexander Crichton, *I never saw bleeding lessen the violence of the paroxism, but, on the contrary, I have seen the excitement augmented by it.* Puerperal insanity is of the same description of disease as the high state, and the same observations apply to it.

IDIOPATHIC INSANITY.

Insanity is very rarely indeed idiopathic, and when it is, my experience leads me to conclude, that it is manifested in very early life, and that it is generally, if not always, incurable. The patients of this class, who have been placed under my care, have evinced an untoward disposition from early infancy, much shrewdness and cunning in their proceedings, with equal hardihood or sullenness, according as they have been treated. The cause remains unknown to me: it may be, and doubtless often is, an organic lesion of the brain or its membranes, which is frequently succeeded by epilepsy—a case perfectly hopeless, and which may continue for years. Medicine has appeared to be of very equivocal use in idiopathic insanity, especially

if conjoined with epilepsy; but I have found small quantities of blood, taken either by leeching or by cupping, or by the lancet from the jugular vein or the arm, to have a constant good effect in mitigating the severity, and shortening the duration of the epileptic fits.* But these bleedings should *precede* the fits, and as near as possible to the accession, which may be easily ascertained. When this class of insanity is not accompanied by epilepsy, nor any marked bodily disorder, I am not aware of any rational mode of proceeding, that has not moral treatment, and the regulation of diet, for its basis. The moral treatment should be commenced by a mild and firm discipline: and, however long habits of insubordination, and its offspring, obstinacy, may have engendered an unruly and troublesome disposition, I have never failed, by steadily availing myself of that authority, which is generally accorded to a stranger placed in a superior station, to enforce such a degree of subordination, as to preserve the patient in a tranquil and decorous course of demeanour—so as to impress a transient visitor with the belief, that he was a rational and tranquil person. I shall illustrate my observations by the following case. I. P. aged 19, a young gentleman with a

* See "Dr. Cooke, History and Method of cure of Epilepsy, &c." p. 110.

very small head, afflicted with idiopathic insanity, was, three different times, placed under my care in the space of as many years. When he was at home, he was occasionally violent, and always very irascible; not submitting to any authority, and putting the lives of his nearest relatives, including his father and mother, in imminent danger. By a treatment uniformly mild, and uniformly firm, to enforce the rules laid down for his conduct, I succeeded, in a few weeks after his first admission, to make him an obedient and well-behaved youth, even when it was evident that his intellect was considerably affected. The plan adopted was this. The periods of rest, of meals, of exercise, and lastly of study, were fixed and immutable:—when he became refractory, he was admonished; if he persisted, he was instantly compelled to obey,* except as to study, which was voluntary, or only enforced by example and persuasion. After I had once

* This presumes of course, that the act required, admitted of compulsion: As, for instance, if he were required to take exercise in the grounds, and he refused, through mere captiousness, he was conveyed to the grounds by persons sufficiently powerful to make all resistance on his part trivial: if, when there, he would not stand, (which is not a very unusual occurrence) though persuaded and gently coerced, he was speedily removed to a solitary and dark room: if he persisted to kick the door, or was guilty of any extraordinary violence, he was secured by efficient means to a proper place already prepared in this dark room: and if, having

established this system, we were the best friends imaginable; and at the subsequent times of his being placed under my care, he immediately conformed, so that it was extremely difficult to detect any insanity in him. Lunatics of this class are generally healthy.

I shall now proceed to make some general observations on the medical treatment of the insane.

The physician, having taken the necessary steps, as pointed out in page 39, to ascertain the corporeal state of the patient's health, in which however he will be greatly perplexed if he be practically unacquainted with the habitudes, conceits, and dissimulation of the insane, will not find himself much at a loss to fix his mode of treatment on the broad basis I have already laid down; but to counteract what appears to me to be the erroneous conclusions of some physicians, I shall give a few cases, illustrative of the effects of certain medicines, under their respective denominations.

no other means of annoyance left, he then persisted to scream and halloo, he was either permitted to amuse himself till he was weary, or another *habitually* noisy, though harmless lunatic, was put in the same room with him; this has silenced him in a very short time, and in less than an hour he has come from coercion a tranquil and obliging person. This is the utmost coercion or punishment I ever inflicted on any lunatic patient.

SEDATIVES.

This is an exceedingly perplexing term as it has been applied in the practice of physic. It has been very improperly used in being applied to drugs of very opposite powers, according to their doses.* Having noticed this confusion, I shall proceed with *Digitalis*, which is, in the majority of cases, on its *first administration*, as decided a stimulus as brandy or geneva. It never fails, however, after a few days at least, to reduce the pulse either in force or number, and, in a few instances, both in number and force. Sometimes, however, the pulse *loses* in power, but *gains* in velocity, and when this is the case, I have always found that the medicine was exerting a baneful influence on the constitution; and I earnestly request my junior medical brethren to be exceedingly watchful and cautious of producing this effect:—when it is manifested, the vital powers are giving way; and whilst we are watching for the sedative power of digitalis, whilst we vainly expect or hope to find the pulse drop from 120 to a moderate number, our patient will sink into oblivion. I believe Dr. Withering has the

* Since writing this chapter, I have gone through Dr. Hallaran's "Practical Observations," and refer the reader to p. 98 et seq. for much useful information respecting digitalis.

honour of being the first to suggest the use of this powerful plant in cases of mental derangement, and by a due attention to his directions, relative to the state of the fibre especially, the practitioner will very seldom be disappointed. I have uniformly found, that this powerful drug exerted a beneficial effect in allaying the maniacal paroxisms, and reducing irritability, exactly in proportion as it reduced the pulse, *whatever might be the mental action*, whether gay or melancholy.* That it is a most valuable medicine the following case will evince.

May 20th, 1817.—John Tracie, aged 35, a compact, strong-made, little man, generally cheerful and obliging, had been a lunatic some time, and exhibited the following symptoms:—eyes bright, quick, and prominent; countenance animated and sarcastic; pulse greatly accelerated; very talkative with great volubility; inquisitive; and quick and sarcastic in reply; bowels costive.—Pergat.

May 21st.—He is boisterous, impudent, noisy, countenance expressive of great excite-

* I shall take this opportunity to inform my reader, that I have gathered the Digitalis Purpuria so late as the end of August, long after the plant had ceased to blossom; and by selecting those plants which were vigorous, and the leaves of which were covered with a downy coat, and which had not blossomed that year, I found they possessed the sedative power of the plant in great perfection.

ment, spits at people, and then uses abusive and reproachful language:—pulse, quick and full, carotids beating powerfully.

R. Tinct. Digitalis, m. xxv. ter de die sum^{d}

22nd.—Is more noisy and talkative, turning the language of his attendants into ridicule, jeering and jesting at them, spitting at them, using most offensive epithets; in the interims of these personal observations talking deliriously. Last night he began to destroy every thing within his power; and he was in consequence confined by proper and efficient means to his bed, yet his exertions to break loose have been *powerful* and *incessant, these last twelve hours.*

R. Tinct. Digitalis, m. xxx. ter de die sum^{d}.

23rd.—No alteration. Continuatur.

24th.—No amendment; pulse quick and full.

R. Tinct. Digitalis, m. xl. ter de die sum^{d}.

Hitherto we perceive the digitalis had produced no beneficial effect: on the contrary I was surprised to find that it had exerted a *stimulative* power, for at the time I wrote this case, I had not remarked this general effect of digitalis.

25th, 9 A. M.—He is not quite so violent; says "he perceives the medicine does him good:" pulse quick.

R. Tinct. Digitalis, m. l. ter die sum^{d}.

7 P. M.—Pulse still quick, and he is more noisy.

R. Tinct, Digitalis, ʒi vespere capiend.

26th.—He is much less excited—pulse sharp and ninety.

R. Tinct. Digitalis, m. LXX. ter de die.

27th.—No note:—the digitalis was continued.

28th.—Has been sick, with nausea,—this morning is much more rational, and more tranquil, so that he can be liberated from coercion—pulse soft and sixty.

Omitt. Digitalis.

29th.—Is much more calm and manageable,—passed the night without being confined to his bed—pulse forty-two and rather irregular—he appears languid—*appetite good, and he is permitted to eat heartily:*—from this time forward he continued to improve.

I have in a great number of instances been under the necessity of giving digitalis for two or three months successively; generally in smal doses of m.v to m. viij. ter de die. This has kept the pulse steady, and the patients have been enabled to enjoy amusements, exercise, or labour, and to mingle peaceably with the other patients. I have repeatedly omitted the medicine, and as certainly the insubordinate disposition, and restlessness, and a slight acceleration of the pulse, have followed. On resuming the medicine the patient has peaceably and cheerfully returned to his usual avocations—generally labour; and under this treatment has been very

much improved in health, and ultimately restored to sanity. I am desirous to direct the particular attention of my reader to these facts, because I know some, and among them a distinguished physiologist, whose private instructions it was my good fortune to receive, imagine that digitalis allays excitement only by impairing the vital energy.

The two Misses L—— laboured under melancholia religiosa, with a quick pulse. After attending to the state of the stomach and bowels, I put them on a course of digitalis, *and they improved as the pulse was reduced*, became more manageable, and by the powerful aid of a moral treatment, which I believe was judiciously planned, and faithfully carried into execution, both these patients recovered, though they had long, I think some years, been considered in a hopeless state.

I intended to give these cases at full length, but I am precluded from so doing. I however think, that all practical purposes will be answered by the foregoing statement of them. I frequently combine camphor with digitalis, and have found its effects rendered more certain and uniform.

M. Esquirol says of *Opium*,—"As maniacs sleep badly, opium, and other sedatives have been employed; but they are now proscribed

by unanimous consent, as dangerous remedies. Regimen and exercise are the only somniferous measures, which can be safely recommended; they are generally successful too."*

It would appear by this, that M. Esquirol is not well acquainted with the practice of some of the most experienced physicians of this country. Dr. Hallaran, who in the space of 30 years must have had extensive experience, has a distinct chapter on opium, commencing at p. 123, 2nd edition; and in p. 127 he speaks of it as being, under certain given data, of infinite utility, although it certainly is, for the insane, the most objectionable of anodynes. I presume by other sedatives is meant other anodynes. I can assure the Doctor, that neither opium, nor the other anodynes, are proscribed by unanimous consent. Dr. F. Willis uses the herbane, hemlock, and foxglove, to allay irritability;† and in illustration of the powerful effect of the hyosciamus, I shall briefly relate another case, similar to the last:—the symptoms being precisely analogous, I shall not detail them.

* Analysis of M. Esquirol's paper on Insanity, in the Dictionnaire des Sciences Medicales.—Medico-Chirurgical Review, for September, 1820, p. 263.

† Gulstonian Lecture, p. 123.

April 1817.—The excitement was combated with small doses of camphor and æther, and by taking half a pound of blood from the neck: and on the third and fourth days he took,

Camphor. gr. x.
Opii p. gr. i.
Nitr. gr. v.—Fiat Bol. vel Haustus 6. q. q. horâ sum$^{d.}$

He continued this till the fifth day, without any amendment. At night, on the fifth day, I ordered him the following, the physician who had the conduct of this case being absent.

R. Extr. Hyosciam. gr. xxv. horâ somni sum$^{d.}$

The note, in his own physician's hand-writing, on the next morning, is this:—"Is at present asleep, and was more tranquil during the night."

He after that passed under my care, and I copy this note, written at the time in his bed-room.—5 P.M.—"Is at present out of bed, being loosened from restraint:—his pulse is quick and feeble, his tongue is parched and covered with fur. He appears very weak, being unable to stand. Let him have for common drink, water acidulated with muriatic acid." Next day he was still better, and had the tepid bath, but

although he took his food well, I found it necessary to support him.

R. Decoct. Cinchonæ. ℥vi.
Extract. Cinchonæ. ℈ij.
Conf. Arom. ʒi. Fiat mistura, de qua capiat cochlearia iij. quarta quaque horâ

He continued this medicine about three weeks, when his bodily health was quite restored: the bark had a decidedly good effect. In this case I think the beneficial influence of an opiate was conspicuous; doubtless the calm night and sound sleep were wholly owing to the hyosciamus. I have also frequently given the Extract of Hyosciamus, in doses of gr. v. quarta vel sexta quaque horâ, with the effect of tranquillising very restless lunatics, and I have for years been in the frequent practice of giving the same anodyne in doses of 20 and 30 grains at bed-time, with the most complete success as to procuring rest; nor have I, in any one instance, witnessed any ill effect from its use. A good bottle of porter and a hearty supper must be a pleasant soporific no doubt, and for the voracious, I dispute not, an appropriate one; for Aretæus and Trallianus have both pronounced wine to be most efficacious in mitigating the fury of a paroxism, and in promoting tranquil and refreshing sleep. Lunatics however are not so insane, but that

they would give the most flattering reports of its efficacy.

PURGATIVES.

I have rarely found that lunatics require more powerful purgatives than other persons: sometimes, however, lunatics labour under very obstinate constipation, when the use of the most active purgatives may from circumstances be dangerous, or rendered abortive, and enemas useless, being stopped by hardened compacted fæces in the rectum. The circulating swing too may be highly improper. In this state, the following suppository, which I have had in very frequent use for many years, will be available and effective.

R. Extract. Elaterii gr. i. ad ii.
Submur. Hydr. gr. v.
G. Gamboge gr. v. Sapo. dur. q. s. fiat in ano imponatur.

EMETICS.

I do not recollect that I have ever been obliged to give an unusually powerful emetic. I have found Pulv. Ipecacuanhæ. ɔi. Antim. Tart. gr. i. sufficient.

ALTERATIVES, &c.

As the "pilulæ hydrargeri" has been by some denounced as an improper medicine in the cure of the insane, I beg to state, that in a very great number of instances in which I have used it, in old cases, (for I never have thought it a proper medicine for any recent case) I have never once witnessed a bad effect; but, on the contrary, there is not a solitary instance, where the medicine has not been of some benefit, and many cases, where the recovery was chiefly, if not wholly, attributable to it. I have generally conjoined with it, either the carbonate of soda, digitalis, or colombo, according as the corporeal ailments seemed to require these remedial means. I am not, however, a devotee to mercury. I should apprehend mischief from its use in most, perhaps in all *recent* cases, attended with excitement, except as an ingredient in an active purgative. I have thus briefly endeavoured to set upon these medicines, what my experience leads me to consider, their just value in the medical treatment of the insane; with the two-fold view of rescuing them, as far as I am able, from that depreciation, which I am convinced they do not merit, and of rousing the attention of medical men to the subject,

because the opiates and mercury are auxiliaries in the cure of the insane, of far too great moment to be laid aside, merely because the authority of great names is against them. Independence in the practice of physic is as essential to excellence, as in any other pursuit where the mind of man is called upon to make its way through a devious and obscure path. He who is guided solely by precept and example, can confer but a negative benefit on mankind, and will not advance one step in original excellence and useful discovery: all his merit, like that of the devotees of Bramah, will consist in a lame and blind subserviency. But, however, I would strongly caution the inexperienced, never to venture on the use of medicines of extraordinary power in the cure of insanity—as, for instance, on the hydrocyanic acid and colchicum: enterprises of this sort are only justified by much previous study, weary experiment, and cautious induction.

It is quite impossible to rely upon the accounts which the insane give even of symptoms of great urgency. They will tell you of sensations they perceive not, and deny sensations that are obviously acting powerfully on them: this has led me to be extremely cautious in the exhibition of new and powerful remedies. Forty years and upwards have made the digitalis

familiar in practice: not so the colchicum or hydrocyanic acid. The digitalis shews when it acts upon the constitution, by its effect upon the pulse; and a very moderate degree of caution will enable an experienced practitioner to give the digitalis in the treatment of the insane, even should he be ignorant of the deceptive manner and language of patients of this class:—the pulse will be a sure index. But, if this medicine had been given at the time suggested by Dr. Withering, and in the doses, too, prescribed by his disciples, and nausea and vomiting had been the signals for diminishing or suspending the medicine, I have not the slightest doubt, that death must frequently have been the sequel of such practice. The safe, and, therefore, the only justifiable mode of proceeding, seems to be, to administer no medicines to the insane *with the use of which we are not familiar, and that too only after being well versed in the peculiarities of the insane.*

OF BATHS.

The shower bath frequently relieves the headache and irritability in old cases, when the skin is hot and dry. It may also be advantageously used to allay the irritability and restlessness of some epileptics. By its use, I have frequently seen the fit postponed.

I think the shower bath is not in any other cases peculiarly beneficial.

The tepid bath, at about 96° Farenheit, is very grateful to almost all lunatics, and there are very few cases in which it may not be advantageously used, at least once or twice a week. Besides its influence in promoting a healthy state of the skin, it washes, and secures cleanliness, in some degree at least; and on this account alone is of much value. The cold bath, plunging or otherwise, has appeared to me not so useful as the shower bath.

CIRCULAR SWING.

As this machine must be considered more in relation to its physical than its moral action, I shall notice it in this place. It is a mean in the cure of insanity, possessing immense power. A patient, subjected to its action, is speedily affected with giddiness and sickness, and the peristaltic motion of the whole alimentary canal seems to be excited, and in some instances to such degree, that the patient vomits, and passes fæces in rapid succession and great abundance, along with his urine. I have found the circular swing extremely beneficial in obstinate constipation, and in dyspeptic complaints accompanied with much acid. Mary Sandiford, a very fine young woman, said to

me on the 20th September, 1823,—" Putting me in the circular swing did me more good than any thing else: it threw all the sour stuff off my stomach." Shortly after this, she recovered, and was discharged well. When patients are very unruly, and at the same time afflicted with either of these ailments, it never fails to be physically and morally beneficial. Apprehensions have been expressed least the use of the circular swing should induce apoplexy: having attentively examined the sources of these fears, I conclude them to be perfectly groundless; nor have I ever seen the slightest reason to apprehend such result, nor do I believe it ever *can* occur, *if the patient be not in a furious state when put into the swing*; but if he be, the excitement of the mind will counteract the effect of the swing, wonderfully powerful as it is. The act of turning him will exasperate him still more if possible; he will struggle violently, and neither stomach nor bowels be affected, at least for several minutes, if at all; and the visible blood-vessels of the face and neck have become exceedingly turgid by the paroxism of fury and exertion: but, even in this case, it is more than probable that arterial action is checked. When giddiness is felt, the stomach is speedily affected, and the pulse is lowered both in frequency and strength—a pro-

cess not likely to terminate in sanguineous apoplexy, the only species to be apprehended. With this single exception, or precaution, I consider the circular swing perfectly safe. It is a machine that should be easily accessible in every asylum for lunatics, *but never used* except under the direction of an experienced physician. I consider the best time for its use is a little before retiring to rest for the night, as the unloading of the alimentary canal, the lowering of the pulse, and the relaxation of the skin, very generally predispose to sound and refreshing sleep. In concluding my report relative to this machine, I shall take the opportunity to declare my conviction, that it might be made extremely useful in general practice, especially in some inflammatory affections of the viscera of the abdomen, and probably in the commencement of some fevers. I refrain from troubling my medical reader with my reasons for this conclusion, as I apprehend he will readily recognise them in the facts and opinions recorded in the preceding pages.

OF EPILEPTIC LUNATICS.

Ere I conclude this chapter, it may be proper for me to report my observations relative to the treatment of that very hopeless state, epilepsy conjoined to insanity—a compound dis-

ease, by some supposed incurable. By my tables of classification, appended to this sketch, it will be seen, that of this class more than one in seven have recovered; that is, of fifty-eight epileptic lunatics eight have been restored to sanity. Small as this number may appear to the general reader, yet the experienced medical practitioner will, I doubt not, be desirous to be informed of the treatment that led to this unusually favourable result. I regret that I cannot now give the details of my practice, as my journals, containing these cases, are at the Lunatic Asylum for the county of Lancaster. I cannot even give all the names of the patients; but fortunately I have their numbers, and any person, by referring to the public book of admissions and discharges, kept in that establishment, may in a moment find any number, as they are consecutive, and the name stands immediately opposite on the same line. Having found the name, it may with the same facility be traced in the indexes, at the commencement of each of *my* journals of practice of Physic, which I understand are preserved amongst the other public documents of that Asylum. I speak of the journals kept by myself, and actually written from day to day in the apartments and at the bedsides of the patients; and not of an imperfect copy of these journals, which also is

—at least was—kept. The numbers of these men are as follow:—No. 13—213—267—321—386—James Farrer, No. 570—James M'Claughlin, No. 508—and George Chambers, No. 509. These are the numbers of the women.—No. 258—331—500. For James Farrer's case see *my* journal of practice of Physic, for the year ending July, 1823, p. 164—John M'Claughlin's same book, p. 68—and George Chambers's same book, p. 28: these three cases, by some accident, or for some reason which I do not recollect, were not entered in my tables as epileptic; or the number of cured would have been 11 in 61, more than one in six. Although I cannot give the particulars of my treatment, I trust every practical purpose will be answered by an outline of the methods I generally pursued. I have freely used the Spirit. terebinth rect. as recommended in the Edinburgh Medical and Surgical Journal, by Dr. Edward Percival, frequently with much benefit, the fits being often suspended from their usual accession, and when returning being less violent. Added to this, I have checked the circulation of the blood, when necessary, with the foxglove, and aided the stomach and liver with Carbo. sodæ pil. hydr. and columbo, according as the use of these medicines would be indicated in ordinary practice. Nor have I hesitated to give all these in

conjunction, or variously combined; for I am long since quite satisfied, that much more can be effected by a skilful combination of various remedial means, than by the most judicious exhibition of an isolated remedy. Simplicity in prescription is a good way to *learn* the practice of physic, but it does not appear to me always the most certain method to attain our object. Various other means advocated as remedies in epilepsy have been used, as the Cuprum ammoniata, argent. nitrat. valerian, &c. but I have seen no benefit result from their use, in which I have been much disappointed, since so many distinguished physicians speak highly of these remedies in the cure of epilepsy. When the general health and appearance of the patient did not forbid, I have taken blood in small quantities, from four to six ounces, from the arm, or, which is better, from the jugular vein, with uniformly good effect in shortening the duration of the fit, and in rendering it much less violent; but this bleeding should not be after the fit, nor during it, but immediately preceding it. In these, as in all other cases attended by derangement of the mind, the bowels should be always kept in an active state, but not purged. Straightening the hands and limbs has very frequently appeared to put a stop to the progress of the fit; and where it can

be effected without such violence as to hurt, I have always permitted it, and sometimes advised it. This is a vulgar practice, and, like most other vulgar practices, has I believe some truth for its foundation. For a very learned and ample account of the various causes, symptoms, and means of cure of epilepsy, I beg to refer my readers to Dr. John Cooke's "History and method of cure of the various species of Epilepsy, 1820." Since writing the above, I have accidentally met with the following memorandum:—"Thos. Halliwell, epileptic lunatic, folio 23, 5th January, 1820—recovered during the use of Spirit. tereb. rect. ʒiij. Tinct. digitalis, m. viij. ter de die sum$^{d.}$" This memorandum refers to *my* journal for that period, which is now in the Lunatic Asylum for the county of Lancaster. Jas. Whittingham is another epileptic lunatic, recovered during the use of digitalis and spirit. Tereb. I think his number is 142:—his case may be easily found. I have frequently known the accession of an epileptic fit checked by various means, as by surprising a patient, or suddenly shaking him; but I cannot recommend the practice, as great irritability has uniformly succeeded, or a state approaching to dementia, and the general health of the epileptic has not been so good for a week or more after, or till a regular fit has

supervened. The precisely same result has taken place in checking the aura epileptica; the attack has been postponed, but the general comfort and health of the patient have been much impaired for a time: and the breaking in upon the accession by any mental influence, as by surprising him, by suddenly shaking him, &c. should be avoided.

OF THE MORAL TREATMENT OF THE INSANE.

The moral treatment of the insane has been improved so greatly within a few years, that it is, in my opinion, an honour to the age in which we live; nevertheless, the subject is so important, that I feel I should not discharge my duty, if I were not to add my mite to the stock of information already before the public. My observations, deduced from rather an ample practice, shall be delivered as briefly as their bearings will warrant. The subject is of the utmost importance to the individuals concerned, whether patients or superintendents; and therefore merits the unremitted study of every one who has this delicate, difficult, and frequently painful duty to perform—a duty re-

plete with perplexities, and beset with dangers, both as regards person and reputation.

It is the daily duty of the superintendent of a great number of lunatics, to sooth the irritable, repress the insolent, cheer the desponding, calm the excited, check the forward, encourage the timid, resist the importunate and petulent, but *carefully* to attend to reasonable requests; for he has daily causes to try; and he must, at one and the same time, be counsel, judge, and jury: and as lunatic litigants frequently possess great acuteness, and always much irascibility, it becomes no trifling task to reconcile conflicting pretensions. He is, however, importunately called upon to decide, and his judgment must be supported by fair and conclusive, or at least plausible reasoning: or discord, discontent, and suspicion, will speedily supersede confidence and an affectionate respect; for when the matter does not touch upon the peculiar hallucination of the lunatic, he generally pays much attention to, and acknowledges the force of reason. Frequently the quarrels of lunatics do not arise altogether from deranged notions of right, but from the same malevolent passions that beget contentions amongst the more sane part of mankind. Lunatics very generally regard with derision or compassion the hallucinations of their fellows, and permit them to in-

dulge in their eccentricities with the forbearance of the sane. It is a curious and interesting spectacle to see them thus acting towards one another. The proud, however, form a general exception to this rule; rival monarchs rarely agree: the only exception that occurs to my recollection is, where one mighty potentate is always exceedingly amused at the absurdity of any one pretending to regal power without his sanction and authority. The anger which he evinces is manifested in epithets of his sovereign contempt, accompanied with bursts of deriding laughter. Such conduct as this requires no interference, much less expostulation or reasoning; either the one or the other would be only parallel to the administering stimulating drugs to those already in a state of excitation; maniacal fury would probably be the result of both practices. On the other hand it is a great error to pretend to coincide in opinion with the lunatic, acknowledging his pretentions, confirming his opinions, and saying every thing that may be supposed to be pleasant and soothing: fortunate indeed will be the result if the effect is not absolutely the reverse. The lunatic, for instance, who has thus been confirmed in his belief of his own sanity, at once becomes restless, irritable, and importunate, although he was previously tranquil and contented. I

have known this apparently trivial error in moral management produce raging and ungovernable madness. To me it appears equally absurd, and I know it to be equally prejudicial, to reason, as it is called, or argue with the lunatic, for the purpose of convincing him of his hallucination. Many a well meaning person, confiding in the cleverness of his reasoning faculty, may be seen combating the false perceptions of the peaceable lunatic; for it is with the peaceable only, that these sage persons enter the lists; they never venture to engage with the turbulent or the excited, although frequently the saner of the two. The peaceable lunatic becomes at first a tranquil and willing auditor; till finding *his* understanding insulted, by the evidence of *his* senses being either absolutely denied, or boldly questioned, he becomes indignant at the barefaced assurance that would impose on him as truth, that which the evidence of *his senses*, perhaps anxiously and repeatedly examined, tells him to be false. It will be found most prudent, most conducive to the patient's recovery, to permit the accuracy of these insane perceptions and morbid ideas to go unquestioned, and perfectly unheeded, to carry the lunatic's attention to a very different subject, and to fix it, as much as possibie, on that which has no relation to the hallucination.

He, who presumes to undertake the moral treatment of the insane, should be constantly actuated by a benevolent and forbearing spirit; occasionally enduring insolence, and the grossest insults, not only with patience, but even good temper, rather than inflict the slightest restraint on a patient, unconscious of the nature of his offence. In exercising a judicious discrimination on this head, much practical knowledge is necessary; for it very frequently happens that the lunatic is perfectly aware of the tendency of his words and actions, in which case it will be equally proper, and conduce to his cure, to resist him; but this resistance should be exercised in a mild and firm manner, with a calm dignity, for any manifestation of irascibility, on the part of the attendants, is wholly inadmissible. That the lunatic is occasionally fully aware of the tendency of his words and actions, the following circumstance will afford some illustration. An intriguing, unruly, vicious, male lunatic was detected by myself with a piece of iron, which he had contrived to shape like a dagger, with a handle firmly fitted to it. Of course I had it removed. He immediately became excessively abusive, and I directed some restraint to be placed on him; and he was secured with the hand-muffs which I invented, and which I shall subsequently describe. On

this he lost all command of temper, and uttering the most revolting imprecations, exclaimed, —"I'll murder you *yet*: *I am a madman, and they cannot hang me for it.*" I took no particular notice of this threat, though I doubt not it was sincerely meant. I deemed it prudent, however, to have my eye more particularly upon him, and kept the hand muffs on about three weeks, when all restraint was removed, and he was placed under a somewhat strict superintendence for a short period; but as he *abstained* from any absolute violence, he was free from coercion of any kind. I treated him, however, with a studied reserve, till I saw he was ashamed of his conduct: I then treated him with the same cheerful freedom and good humour that I have always endeavoured to observe towards all my lunatic patients. We soon became very good friends, and the recollection of the premeditated assassination was permitted to sink into oblivion. On no account should a patient be beaten: strick coercion in a dark room is generally sufficient for very unruly lunatics, if done in a mild and determined manner; for I cannot too strongly enforce the axiom, that every species of punishment, and coercion of any kind is punishment, should be inflicted firmly and mildly; and the demeanour of the attendants should indicate regret for its necessity.

At the same time the patient should be taught by the powerful means used, that resistance would be perfectly useless; and this last is of the utmost importance, since inefficiency, as well as harshness and severity, begets a spirit of resistance, and has a direct tendency to excite furious mania, a species of insanity, that, under proper treatment, will never exist longer than a few hours, *after the confidence and respect of the lunatic have once been obtained.* This must not, however, be confounded with what is termed the high state, nor that vicious, irascible state of mania, where consciousness and perception seem nearly extinct. By these methods there are but few insane persons who cannot be made cheerful and tranquil—the most favourable state of mind for bodily health, and consequently for the recovery of the mental faculties. But I do not mean to assert that moral treatment alone is always, or even frequently, competent to produce this effect; or that there are no patients who require constant coercion, or nearly constant coercion; but it ought to be a law in the treatment of the insane, that all restraint is improper, which is not imposed, either to prevent the patient from injuring himself, or others: *and then the moral treatment which preceded the coercion should be jealously inquired into.* For I fear it will be some-

times found, even in the best regulated establishments, that the necessity for coercion has arisen out of some mismanagement in the *prior* moral treatment. There are, however, occasions, when strict coercion will contribute much to the tranquillity, and, consequently, to the comfort of the patient; indeed so much so, that lunatics have been frequently known earnestly to solicit coercion. The man, whose case has been just related, has himself requested to be strictly confined. But the cases that require strict coercion arise generally in the early stages of the disorder, *the delirious stage*, when the medicines have not had time to allay excitement, or when the novelty of restraint and superintendence has not ceased to excite uneasiness and suspicion, or perhaps resentment: and this is the most important, the most difficult period of moral treatment. It behoves every one, the relatives and friends of the sufferer, as well as the professional practitioner—all in fact who are permitted to approach the room of suffering, to be *extremely circumspect in their conduct*, when the truly alarming and melancholy symptoms of deranged intellect are *first manifested*. We should permit neither word nor action, if it be possible to avoid it, to indicate to the lunatic that we consider him to be insane: it is not improbable that he may have

some suspicion of his state; it is more than probable that he is aware that some strange malady affects him:*—how cruel then, and how unwise, to affright and afflict this doubter with the *conviction* of the melancholy truth! It may be, that perception and memory have become so impaired, that he cannot recognise the strange state of his feelings, or the altered demeanour of his friends and attendants; but very frequently the reverse is the fact, and then the utmost dexterity and *experience* are necessary to enable the attendant *to avoid awaking the fears of the patient;* for if his own confused notions or suspicions are confirmed by the injudicious observations, or conduct of the bye-standers, the alarm, and I think shame or mortification it produces, cannot fail to augment the disorder of an intellect already deranged. A mischief of this kind I witnessed only a few days since; but, as the case is but just commenced, I shall not notice it, further than to observe that the relatives of the patient having

* Shakespear makes Lear say in addressing Cordelia,—"To deal plainly with you, I fear I am not in my perfect mind." —Again in Macbeth, "Is this a dagger which I see before me, the handle toward my hand? Come! let me clutch thee. I have thee not, and yet I see thee still. Art thou not, fatal vision, sensible to feeling as to sight? *Or art thou but a dagger of the mind?—a false creation, proceeding from the heat-oppressed brain?*"

in his presence openly declared their suspicions of the nature of his malady, it evidently caused him extreme anxiety, and I doubt not has given the character of melancholia to the complaint. The following case I had every opportunity of observing from its commencement to its termination.

A fine young woman was for some weeks irritable, and became slightly out of health; a low febrile attack followed, for which the usual remedies were successfully employed. Her manner from the first, was peculiarly timid and hesitating, and *after giving an account of her ailments*, she would suddenly and peremtorily insist that nothing was the matter with her, that she was perfectly well, and that she was fully equal to do her duty as an attendant on the insane; for she was a nurse in a large hospital for lunatics. At this time her *actions* were more *confused* than her *words;* she would on a sudden seem to forget her intention to return to her duty; yet all those persons she was acquainted with, she knew as soon as they entered her room, and would converse with them rationally, except about her health and her duty. Her opinions were never combated; if her actions required any interference, which they very frequently did, she was diverted from her object in a manner as indirect

as possible. During her febrile state, which lasted about three weeks, when she was questioned as to her health, &c. she would instantly reply in a sharp tone, and *with a look of surprise*, "I am very well, I thank you Sir; nothing ails me," although she had no appetite, was always thirsty, and so weak she could scarcely stand. She gradually recovered her strength with the aid of bark, and in about five weeks she was permitted to resume her duty, as a mode of effecting her recovery from the insanity that she laboured under. Her manner, however, was much altered, and she was so irritable with the patients and her sister-keepers, that only the conviction, that I was pursuing the best mode for her recovery, induced me to tolerate her. Even for years afterwards, when she was asked by me, in a cursory way, how she did, not so much as reverting in my own mind to the circumstances of her former ailment, she invariably replied, in the same short manner as formerly, "I am very well, Sir, I thank you; I always have been very well." But I have as often noticed her to eye me anxiously,—I think to see if I had discovered her secret, or if I disbelieved her, and I am convinced that she was conscious not only of having been ill, but of some strange notions affecting her, perhaps of having been

insane. She was a young woman of pleasing and mild manners previously to the attack, but for two or three years afterwards there was a degree of irascibility which had not before subsisted; this, however, gradually wore off, and she became herself again. Let us for a moment pause, and consider what might have been the result of this case had it been differently treated; let us suppose that she, like the patient at present under my care, had been shocked and terrified, by the unfeeling, the extremely injudicious exclamation, that she was insane. Suppose, on the one hand, the usual timidity of some bye-standers, and on the other, the well meant, but the ill-timed, and, to the patient, insulting interference of others; let us pourtray to ourselves, the abominable straight-waistcoat, the strange attendant, and all the accompaniments of a lunatic's room; let us suppose that my treatment had made all this the lot of this young woman, and it requires no stretch of faith to believe, that a case of insanity, requiring coercion, would have been produced; and, instead of the low and slight derangement we have seen, we should have had a striking specimen of the high state, and a lunacy of at least some months' duration.

In concluding my observations on this part of the moral treatment, I beg to repeat that

the *conduct of all who approach the insane is always of great importance*, but of the utmost and most pressing moment, when, the derangement of mind is first discovered. 'Tis then that "trifles light as air," are to him "confirmations strong:" the slightest singularity in dress or manner, the least ambiguity in word or expression of countenance, unusual noises, &c. become fruitful sources of speculation, of the most extraordinary imagery, and of the most extraordinary conclusions.* These all partake of the ideas most familiar to the patient, when in a sane state, if some corporeal sensation does not give them a specific action, as in nymphomania, &c.

Burdikin, an engineer, labouring doubtless under severe cephalalgia, groaned and shrieked dreadfully, and I could not appease him. He stared wildly and fiercely, filled his lungs with air, and blew it violently through his closed teeth, strongly clenched his hands, and held his limbs and body stiff: at length he exclaimed, in accents of great terror,—"A steam engine wheel is crushing my head!"

In further illustration, I shall at the end of these observations present my reader with the history of the emotions, sensations, and hallucinations of a gentleman, not only during

* See the History of a Lunatic, written by himself—at the end of the Volume.

the delirious stage, when he was in a state of animal and mental exaltation, but afterwards when he had become, what is vulgarly termed low—that is, when the usual tone both of his corporeal and mental powers had been weakened. He was not under my care during the whole period embraced by the history, and I cannot therefore speak to its accuracy altogether; but from the general correctness pervading that portion of which I am competent to judge, I doubt not that the whole is sufficiently correct to convey a just and clear idea of the sensations, impulses, or motives, and intellectual commotion of insane persons in general, whose derangement partakes more of the cheerful than of the desponding character, as was the case with this gentleman.

AMUSEMENTS.

Hitherto I have only spoken of the *general* conduct to be observed in the treatment of the insane; I shall now consider the moral influence of particular occupations, both the useful and the amusing: And, in the first place, I shall notice mere amusements, because they are usually the first occupations an insane person can be induced to adopt. Drafts is a game well suited for the insane, in weather un-

favourable for out door exercise; it affords a gentle stimulus to the mind, without exciting the passions; and from frequent observation, I know that many lunatics are capable of playing excellent games: one under my care was probably as good a player as any man, though he was incurable, and had frequent paroxisms of complete insanity, accompanied by epilepsy. Many expert players visited him, to try his skill, but I never knew him beaten; he immediately perceived an erroneous move, and as certainly forced his antagonist into the toils. He intended to have written a series of games for me: I have a few, the manuscript of which I shall attach to my own, that it may be printed exactly as he wrote it.—[See Table.]

This will, I trust, at once shew, better than a volume of mere theoretical argument, how necessary rational amusement is to the comfort of the insane; the health of this poor fellow unfitted him for labour, and had he not been amused, the lingering torture of a hopeless ennui must have been added to his other miseries.

Nine-pins is also a game well adapted for men. The pins and bowl should be made of strong leather stuffed with horse-hair, by which contrivance they cannot be used to effect personal violence of any moment. This game was

To face page 82.

Game 1st.		V—1st	Game 2d		V—2d	
23—18	11—18	8—11	11—16	9— 5	10—14	11—15
11—16	23—14	15—8	23—18	2— 6	26—23	8—11
24—20	25—22	4—11	16—20	3— 7	8—11	16— 7
16—19	10—15	27—24	24—19	6— 9	22—17	2—18
18—15	22—17	11—15	8—11	7—10	11—16	32—27
9—14	14— 9	22—17	19—15	17—21	17—10	21—17
27—24	17—14	9—14	10—19	5— 1	7—14	12—16
5— 9	9— 5	25—22	18—14	21—25	25—22	17—14
22—17	14— 9	6— 9	9—18	31—26	6—10	16—19
12—16	5— 1	17—13	22— 8	22—31	22—17	14—10
20—11	9— 5	1— 6	4—11	29—22	4— 8	19—23
7—16	15—18	22—17	27—24	31—24	30—25	18—15
32—27	5— 9	3— 8	20—27	28—12	8—11	Drawn.
16—20	28—24	29—25	31— 8	W—W	17—13	
17—13	9— 5	8—11	W—W		3— 7	
1— 5	18—14	31—27	V—1st		13— 6	
25—22	W—W	14—18	10—15		2— 9	
14—18	V—3d	17—14	19—10		25—22	
29—25	7—11	10—17	7—23		9—13	
3— 7	32—27	21—14	26—19		18— 9	
22—17	11—18	12—16	9—14		5—14	
8—12	24—15	26—22	19—15		28—24	
17—14	10—19	6—10	3— 7		1— 5	
10—17	17—10	13— 6	28—24		22—18	
21—14	6—15	10—26	7—10		13—17	
4— 8	26—23	30—14	32—28		18— 9	
26—23	19—26	2—18	10—19		5—14	
19—26	30— 5	25—21	24—15		29—25	
30—23	15—19	7—10	12—16		11—15	
7—10	31—26	21—17	22—17		25—22	
14— 7	8—11	18—22	14—18		17—26	
2—11	27—24	B—W	30—26		31—22	
23—14	11—15	V—2d	5— 9		7—11	
9—18	22—25	25—21	17—14		22—17	
31—26	3— 7	6—10	9—13		15—18	
5— 9	21—17	13— 6	14—10		17—13	
15—10	4— 8	2— 9	18—22		18—22	
6—15	29—25	30—25	26—17		13— 9	
13— 6	2— 6	10—17	13—22		22—26	
12—16	17—13	21—14	25—18		9— 6	
26—23	6—10	9—13	8—11		26—31	
18—22	22—17	27—23	15— 8		6— 2	
25—18	7—11	18—27	6—22		31—26	
15—22	13— 9	32—23	8— 3		32—28	
6— 2	12—16	13—17	1— 6		14—18	
22—26	9— 6	25—21	21—17		23— 7	
2— 7	8—12	17—22	6—10		16—32	
26—30	6— 2	26—17	17—13		24—19	
7—10	W—W	19—26	10—14		26—23	
30—25		14— 9	13— 9		7— 3	
24—19		W—W	14—17		23—16	
8—12					3— 8	
19—15						

The above table of figures contains two games of draughts, with four modes of playing each game. Thus game 1st may be played to 18—15, and then to Var. 1st. and played from 8—11, and so on to B. W.; or having played from 12—16, Var. 1st. then pass on to Var. 2nd, and play from 25—21 down to W. W.; or you may play down the first column to 12—16, and then pass on to Var. 3rd, and play from 7—11. down to W. W.

To play these games readily, number the white chequers of a draught-board, commencing on the right hand chequer, and so on from right to left till the 32 chequers are numbered.

first introduced into my practice about eleven years since, and yet a recent periodical publication speaks of it, as being a most excellent invention made by some foreigner, I think within five or six years, and warmly recommends it for adoption in this country. The contrivance is obvious enough, and there seems to be but little merit in it, except from the great advantages derived from it by the patients. Whether I was the first person who adopted this contrivance, I know not, nor is this of any moment; but as some thousands have visited the Institution, since this game was first introduced, it is possible that the intelligence of the practice of this game may have travelled hence to Berlin, and, by the aid of the enlightened periodical alluded to, back again. This game is greatly preferable to drafts, since it affords a fine exercise for the body, whilst the keeping the score in figures, on a slab which should be provided for the purpose, disciplines the mind to accuracy. It has the advantage of being a game well known to most men, and, if not, most easily learnt, and also of being associated with the recollection of cheerful pastime.

The insane should never be encouraged to write. If they are anxious to correspond with their friends, they may be permitted to write a short letter, provided they are sedate, and not

easily excited or depressed; but even then the bad effect of writing is frequently conspicuous. The subject that absorbs their attention is naturally introduced into their letters; and the mock king, bishop, general, devotee, and lover, &c. all enter warmly and zealously into their imaginary avocations. The exertion of recollecting, and placing their ideas on paper, excites the most vivid emotions, confirms them in their imaginary characters, and they rise from writing much more confirmed, and much more restless lunatics, than they sat down. I never, in any one solitary instance, witnessed any benefit from permitting lunatics to write on any subject, where their own insane notions could be introduced.

Walking exercise is so obvious, that I only notice it to say, that lunatics should never be permitted to stroll about alone, because, if they are excited, they will take too violent exercise, and if depressed, not enough; and the mind on these occasions seems peculiarly prone to indulge in its insane reveries. Old incurable lunatics have been permitted to indulge in these reveries; and the large unpaved yards, I doubt not, of any extensive establishment for lunatics, may be seen intersected in various directions by the track of particular lunatics, who generally look on these paths as their private property:

it is the site of their intense musings. As far as my memory serves me, such cases are hopeless.

LABOUR.

Useful labour should succeed as soon as possible to amusement, if the prior habits of the patient will permit; and many patients are susceptible of benefit from labour, whose intellect unfits them for amusements. Except in the idiot, where conception seems extinct, and where perception is only exercised on some grand impulses, as from hunger, pain, concupiscence, the mind seems always more or less active, excursive, and consequently restless, if unemployed; and therefore should be exercised and carried out of itself, either by manual labour, or some favourite amusement. Labour of some kind, should, if possible, be allotted to all lunatics; some stated task should be imposed which they should, if possible, be made to perform. Lunatics should not be permitted to idle away weeks, months, years, in the apartments or yards of their abodes. This is highly reprehensible and disgusting; and a disgrace to all concerned, whenever it is permitted.

The safest labour, as regards the means, and the best, as respects moderate and wholesome exercise, seems to be the use of the common wheelbarrow. The utmost advantage has been experienced from its use, among the patients under my care, not only of the poorer class, but of those who were more wealthy: I will select one remarkable case in illustration. The patient had been some years confined in a private asylum; and a commission of lunacy being held upon him, it was declared, on the evidence of two physicians of great experience, that he was an idiot. To such an extreme state of apathy had the mind of this most wretched hypochondriac, for he was no idiot, been permitted to sink, I conclude, by the injudicious treatment he had received, that his cure had long been considered to be quite out of the reach of art. For days, weeks, even for months, if permitted, he would stand in one particular part of his room, pulling in pieces one particular part of his dress, and tying it in knots; incessantly turning half round, and then back again, with a shuffling gait; snatching a piercing and hasty glance at the bye-standers; and then shrinking as it were within himself, heaving deep sighs, accompanied with an under-growl of despair. I used various means to rouse him; and after he had been under my care a considerable time, I resolved

to employ him at the wheelbarrow. He would not touch the handles; but, being placed between them, he resumed his singular motion of shuffling half round and then back again. He was urged, persuaded, tempted; all would not do: he was inflexible. We then made him grasp the handles of the barrow, and two assistants held his hands there, and thus at length we went to work. It was a tedious business, and seemed fruitless. We worked ourselves, and, explaining why we wished him to do so likewise, endeavoured to convince him the exercise was not disgraceful: all would not do; he would not touch the barrow longer than he was compelled. After one or two days spent in these endeavours, we at length tied his hands to the handles of the barrow with pocket handkerchiefs; and putting him in the midst of a line of five or six barrows, that were all wheeling on one path, he was constantly urged on by his fellow labourers, who were also lunatics. He demurred and flounced about considerably at first, but shortly, like a restiff young colt newly in the breaker's hands, he set to work furiously; and, instead of being a hindrance to the whole line of labourers, he urged them on smartly: this was to me a most gratifying triumph. The victory gained was followed closely up, and in a few days he was an

excellent workman without compulsion, and in about a week from choice. Still he was excessively taciturn; but being satisfied from the first he was not an idiot (indeed I was one of the three appointed to examine him, when the commission of lunacy was taken out, and gave my evidence to that effect) I used various expedients to rouse his dormant faculties. At length circumstances, calculated to awaken the angriest feelings of any man, came to my knowledge; and I communicated the facts in a manner to stir him up to the utmost. The effect was sufficiently evident to shew that his attention was strongly excited, but the impression was not decisive of his recovery. We continued the wheelbarrow labour; his general health improved; and at length, I *know* after three, and I think about six or seven years nearly total silence, he began to converse: he proved to be a man well informed, and of very acute intellect. From this time forward he rapidly improved, and finally became rational; and was discharged from my care, free of complaint, but not till seven years had elapsed from the commencement of the attack. I am sorry to add, that since his recovery he has repaid my services with a malignant hostility, and consequently the grossest ingratitude; and this I mention as being too often characteristic of

those who have recovered from insanity: but not always so. A lady of rank, who had recovered under my care, always expressed and manifested the liveliest gratitude. A young woman, a former patient of mine, whom I accidentally met in Manchester a short time since, ran to me with an exclamation of surprise and pleasure; and on learning an event that to me she knew must be very distressing, the tears gushed from her eyes. The same kind of grateful attachment was indeed shewn by at least three-fourths of three hundred and sixty lunatics on the same occasion; and I can truly say, that the recollection of the attachment of my patients has been to me a source of consolation. He therefore who has represented the insane, as generally malignant and treacherous, has, I should imagine, suffered an individual disgusting ingrate to warp his judgment.

The insane, in common with the sane portion of mankind, are very sensible of the pleasure derivable from useful occupation; and they will earnestly solicit to be employed; and thus the permission to labour with the barrow may become a valuable source of indulgence and reward on the one hand, and the restriction from labour a convenient means of punishment on the other. I have experienced great advantage from this feeling. Unquestionably the out-door

exercise of wheeling the barrow, or any other field labour, will better contribute to corporeal health, and consequent sanity of mind, than any in-door occupation; especially in those very numerous cases, where the stomach is obviously much disordered, and the cure of which is generally, perhaps always, followed by the restoration of sanity. It is therefore of the utmost importance in the cure of the insane, that ample means be provided for every gradation of exercise and labour; because, superadded to mere exercise, the contemplation of our labour, when we see it is useful, is pleasing and healthful to the mind; it never fails to produce a certain degree of gratification and content; whereas the contemplation of a mere idle use of time is unpleasing, and tends to relax and enervate the mind. These observations chiefly apply to such patients as have been industrious and good moral characters before the accession of insanity.

What has been said of labour in the field relates chiefly to the men: to the women, the household occupations of cooking, washing, ironing, mangling, cleaning, and making and mending of clothing, &c. afford occupations of a healthful character, and seem well fitted for the main object in view. I have had no experience of the effect of agriculture or out-door

labour, on the woman: whether it would contribute to make her more tranquil I much doubt; though certainly the number of noisy, violent, and unruly women, in my practice, has been, compared with the men, in the same species of insanity, at least as two to one. Women too will not amuse themselves with drafts; it seems to require too great exertion of intellect. They enter readily and gaily into the dance, if they have music; sometimes they will play the shuttlecock or romp; but in general they take much less interest in mere amusement than the men; and those who are not well enough, or too indolent to be employed in some useful occupation, will rarely attend, even for a short time, to any thing requiring exertion of body or mind, unless strongly prompted; whereas, on the contrary, the majority of the men of the same class will always be found playing drafts, nine-pins, or, if permitted, platting straw, and making hats and bonnets, baskets, and table-mats of it. The men, from whom I draw these observations, manifest a general spirit of industry and enterprise. In their straw manufacture, for instance, they shew no slight degree of judgment and method; for the whole affair is left entirely to themselves. They have made a systematic division of labour, although I have ascertained it is a novel occu-

pation to every one of them. One picks the best straw, cleans it, and arranges it in sizes and in little bundles; another plats the coarse straw; a more expert hand plats the finer straw; the sole occupation of another is to cut close the ends of the straw from the plats, when the hat is made, which he does with perfect neatness with his thumb nail, and as no person's thumb nail equals his for strength and sharpness, he has full employment—knives and scissors being prohibited amongst his fraternity. Some of their productions are neat and fashionable enough, but others would vie with the grotesque manufacture of Otaheite. The fruits of their labour are only needles and thread to make more *goods*, and sometimes a little tobacco. This evinces incontestibly, that the spirit of industry is incomparably stronger in the breast of an insane man than in that of an insane woman. The sexes are certainly more opposite than is generally imagined.

RELIGION.

I conceive that every healthy and well regulated mind must experience a deep and rooted consolation from the due performance of religious duties; and that the neglect of these duties must beget an uneasiness and discomfort,

harrassing to the mind, independently of any strictly religious tenets of the various denominations of worshippers. It seems as though the "divinity that stirs within us" seeks a higher intercourse, a more exalted and imperishable gratification, than all this sublunary world can yield it. This emotion of the soul, which is common to man, and cannot abandon him, prompts him to seek communion with the Creator of heaven and earth. Feeling this, I listened with much anxiety to the numerous complaints that were made to me from time to time by lunatics, upon the subject of the suspension of religious exercises; and although some of their complaints proceeded from that garrulous importunity, that leads many lunatics idly to petition the restoration of any thing that may be withheld from them, yet I found that many proceeded from a longing desire, and an apprehension of a neglect of duty. I therefore immediately mustered a choir of psalm-singers amongst the lunatics themselves, which was easily done; and on Sundays the lessons were read, and a dissenting clergyman was generally well enough to give a discourse, that at least gratified many of his hearers; and from its temperance, and freedom from particular doctrines, never jarred upon the feelings of any; and although, after the novelty had passed away, his

congregation gradually fell off, or became too familiar, yet from this specimen I was convinced that religious exercises on the *Sabbath* were conducive to the comfort of many patients. I lay a stress upon the day, because very few sane persons, comparatively speaking, are in the habit of resorting to places of worship in the week days, and their having religious worship in the week days has repeatedly appeared to me to make religion too familiar a subject with many lunatics: there is undoubtedly danger, I speak from many facts within my own knowledge, that the melancholy lunatic should become enthusiastic, and others, licentious critics in holy writ. I know it is frequently not safe to endeavour to impress the lunatic with a religious feeling; I know it is not safe for a clergyman to be their *daily visitant* and *spiritual adviser*, unless the Rev. Gentleman is well skilled in the moral treatment of the insane, and keeps constantly in view the danger attendant upon the attempt to impress the mind of the lunatic with proper, and, consequently, exalted ideas of religious duties, and religious objects. But again there is another difficulty to be got over, before the preponderating advantage of a *visiting* clergyman to the insane can be established; I mean the mischief which is always done whenever there is any *appearance* of a divided

authority. I am quite of opinion with others, who are of great experience, and of high standing, that one person only should have undivided authority over the lunatic, and every one that approaches to minister to him; and that superior person should be his physician. On examining sixteen letters, published by the Committee of the New Bethlem in London for 1817, aud received by the Committee from various physicians, and superintendents of lunatic asylums, *fifteen* speak favourably of the effects of religious instruction in their respective establishments, and in the other no religious instruction had been resorted to. Dr. Monro, one of the physicians to the Bethlem Hospital, (an institution I may observe, in which there is a considerably less number of patients than in that I had the charge of) states in the Bethlem Report, pages 32 and 49, that he has observed —" a general augmentation of comfort amongst a considerable class of the older, and more orderly patients." In p. 33, he says—" there is danger, least the effects of such instruction counteract its benevolent intention, by alarming and disheartening a mind already enfeebled by disease; and more than one instance of a similar result has fallen under my observation, where so far from advancing the cure, it has even retarded the recovery of the sufferer."

And again—"I cannot with a safe judgment recommend its exercise, as assistant to the restoration of recent cases; but assuredly I both can, and do approve of the frequent exercise of religious instruction and consolation, among many of the incurable patients:"—see "*Report of the Special Committee, &c. on the expediency of appointing a Chaplain to Bethlem Hospital,*" 1817, p. 33 and 34; where much valuable information may be found corroborative of the beneficial influence of religious worship.

As I am anxious to throw as much light on this important subject as my personal knowledge will enable me to produce, I shall concisely deliver the result of my observations.

First.—The chief advantage that seemed to be derived from divine service being performed on a Sunday was the satisfaction resulting from a consciousness of having performed a sacred duty; although, at the same time, the insanity of the majority rendered them quite incapable of duly appreciating the merits, or the importance of the service. I could bring many cases forward to shew not only the existence of this incapacity, but also that the insane notions of the patients have been called into action by the service, both in my own practice and that of others: see the Bethlem Report, p. 49 to 53. One of my patients never heard the devil men-

tioned, without turning to me, and saying,—"He is your servant:"—yet divine worship afforded him tranquillity and gratification. He was an incurable.

Secondly.—The orderly conduct of the patients at service depends chiefly on their general moral management. If they are properly regulated, there are but few patients, who will behave improperly in the presence of their physician and his servants.

Thirdly.—When divine worship is regularly performed on the Sundays, lunatics in large numbers, say nine out of ten, recognise the pleasing solemnity of the day.

Fourthly.—Lunatics, although of the class called recent, if they do not labour under excitement, or great proneness to excitement, may be with advantage permitted to attend.

Fifthly.—I never saw any injury, but on the contrary much benefit, derived to the convalescents by a temperate exercise of religious worship. I deliver this as the result of experience, and not as *my opinion* only.

Sixthly.—I never could discover, that religious exercises produced any permanent effect on the general conduct of the lunatics under my care, beyond the immediate advantage of allaying that importunity and restlessness, which resulted from the absence of divine worship; and

rendering Sunday, instead of being a day of idleness, gloom and discontent, the most cheerful and pleasing day in the whole week.

In these observations I presume not to express any opinion on that part of the subject, which belongs more properly to the clergyman, and the psychologist. I purposely avoid considering this question in a psychological manner: it does not belong to the province of the physician; if indeed it belongs to the province of any man. The question appears to me to lie between the creature and his Maker; and that too in a very peculiar manner. I have already stated, that a desire frequently exists, and that comfort is derived from its gratification; but I do consider it to be the proper province of the physician to ascertain, if religious misconceptions are making an injurious impression on the intellect, and also that it is his solemn duty to yield to the religious desires of his patients in every degree, that will not endanger their intellect or impair their health: this has been the rule of my own conduct. I shall relate what I know of the effect of psalmody in the section on music.

MUSIC.

Of the power of music, even in a very imperfect state, to tranquillise the insane, and induce an unusual degree of cheerfulness, I have had

instances far too numerous to specify; nor have I witnessed from it a bad effect on any one individual. At the same time I would not be understood to assert, that it is proper, or even safe, to permit all lunatics indiscriminately to hear music. I have never ventured to try its effect on the *excited and recent cases*, nor can I with my present state of information recommend the experiment. Music may be made very subservient to religious worship; psalm and hymn singing, being adapted to arrest the pleasing attention of a sense, and not to call for any active exertion of intellect, is peculiarly fitted for the devotional exercises of the insane: it has always appeared to afford much gratification to all classes of lunatics; and, I am satisfied, may, and I believe has, in many cases, contributed to the restoration of sanity. I shall illustrate this part of my subject by an extract from the history by a gentleman who had recovered his sanity, already alluded to—and from some notes taken immediately on the spot, in the presence of several persons, when the circumstances recorded occurred.

Extract.—" I have already remarked, that I felt very partial to music, whilst irrational; I leave it to more adequate judges, to account for this ruling partiality. My mind was so much relieved by hearing either vocal, or instrumental

music, that every pain was hushed to repose, and forgot to smart, whilst my ear and mind feasted on what they so ardently sought. When I was unable to get any body to sing for me, I, for the most part sung to myself, and was oftentimes so much affected, even by this imperfect melody, that I could not refrain from tears. Sacred music produced the strongest effect on my mind; indeed it was the only sort of music which I desired to hear."

Notes extracted from my Journal of Practice of Physic.

September 7th, 1823.—"George Fillingham, the fiddler, has been this hour past playing on his violin in the large south yard belonging to the men. There are fifty-five patients in the yard, in whom every description of insanity is exhibited, *except the incipient delirious stage.* They are all perfectly tranquil, with the exception of Thomas Hyde, and he is fully as tranquil as at any other time, and is evidently much pleased with the music. All the other patients are chatting in groups, or sitting, or walking alone; and most of them are keeping or beating time with their hands or feet. During the time I have been writing this note, not one patient has offered to interrupt me, though at other times they always crowd round me, and are frequently exceedingly troublesome."

I do not clearly recollect, why so many different cases were placed together, and so many patients in one yard, but I think some workpeople were in one of the other yards.

September 8th, 1823.—"The fiddler is in the men's middle gallery yard, in which are about forty men—all tranquil, some cases of melancholia. Many have formed a dance, others chat cheerfully, others walk or beat time; some stand mute and are very attentive; and, with the exception of one melancholy patient, Lawrence Ainsworth, one of the very worst cases of melancholia, all are more or less cheerful, and evidently amused." The keeper of this yard reports, that he "never saw any of the patients put out of the way, but the most part of them were more lively and more cheerful than usual—very much more so."

I met with the following in a periodical work on Music, the Harmonicon, for Sept. 1823.

"A new mad-house has been erected at Milan, near the Porta St. Celso, which contains a musical saloon, with keyed and wind instruments for the practice of the inmates. It is intended to try here, whether the practice of music will have any influence on mental disease." I have not learnt whether this intention has been carried into effect, but I apprehend, that if music be any more than an humble

auxiliary, injury, and not benefit, will result from its use; and any report upon the subject, unaccompanied with a full account of the moral discipline of the establishment, will not afford any satisfactory data.

The foregoing observations are drawn from the effects of the violin and psalmody on the man. I had not such ample means of witnessing its effects on the woman: I have seen enough however, to lead me to the conclusion, that music, properly conducted, may be made a more efficient agent in the cure of insanity in the woman, than in the man; but at the same time, that it will require more caution in its use, because it acts on her more powerfully. The woman's mind is more influenced by music than the man's. A young married woman, labouring under melancholia, remained in her room, gloomily brooding, and would not come near the music, though repeatedly urged. At length, one evening, when eight or ten couples were merrily dancing, she slowly and cautiously peeped out of her room, where she had secreted herself, and from which she had a close view of the dancing. She seemed afraid, and ashamed of being seen: I was watching her. In a day or two she became less reserved, and ventured from the door of her room. I then directed the attendants to bring her amongst the dancers;

she resisted, though evidently "nothing loth:" the interruption this occasioned stopped the fiddler and the dancers. She was brought through the whole merry group close to the musician: she was a little flurried, a little ashamed, and looked abashed. The soul-stirring violin was again struck up. She paused about a minute, perhaps not so long, though it appeared to me much longer; then suddenly turning round, with one hand she drew her shawl off, and swung it over her head, and began dancing most gaily. From that moment she ceased to labour under melancholia, and shortly after was discharged well.

M. Esquirol, M. D. Physician to La Salpêtriére, in which establishment were nearly 3,000 lunatics in ten years, says, in his work on Mental Derangement, that "Music well managed, acts with considerable power both on the moral and physical frame."

I feel no hesitation strongly to recommend vocal and instrumental music as an important means of cure.

OF THE CLASSIFICATION OF LUNATICS.

Much has been written on this subject, and theorists would have many classes—the epileptic—the noisy—the dirty—the quiet—the cura-

ble—the incurable—the very insane—the monomaniac, all in separate classes. This seems to be mere idle speculation, and would in practice produce the worst results. One epileptic patient shall be extremely dirty, noisy, and violent, and another shall be clean, quiet, obliging, and inoffensive. A curable patient shall be in every respect the most offensive and dangerous among a large number of lunatics; and an incurable equally inoffensive. Would it be wise, or humane, to put this violent curable patient with other curable patients who were not violent? or would it be humane to put the inoffensive incurable with the turbulent incurables? I apprehend it would not. It is certainly highly desirable to have several separate apartments for the purpose of classification, in every establishment for lunatics; but experience will teach, that no advantage can be derived from a strict separation of the epileptic, fatuous, and idiotic from all other lunatics: much less of the curables from the incurables. This may be convenient in such large establishments as La Salpêtriére; but how it can conduce to the cure or comfort of the epileptics on the one hand, or what injury, on the other, may be done to the peaceable lunatic, by being occasionally associated with the epileptic lunatic, I have not been able to discover: on the contrary, the peaceable

lunatic is often a very useful companion to the epileptic, and *vice versa*, many epileptics, at intervals of weeks and months, are very rational, and are excellent companions to the convalescents. Again, is the epileptic attacked by a fit, his companions and friends instantly assist him; but were all epileptics placed by themselves in any considerable numbers, they must daily, almost hourly, have before their eyes the convulsions of one unfortunate or another; and thus, though they might *otherwise* enjoy a state of sanity and cheerful amusements, the lucid intervals would be embittered by the unvaried and unceasing misery around them,—and that too rendered more poignant by the consciousness of their individual liability to the same sufferings. I have found, that in classing lunatics only very general rules can be adopted. The vicious and violent must be restrained: they form one class, including curables and incurables. The very noisy have been found rarely to continue long to be vociferous, and can scarcely be said to form a class: when females annoy their fellows, for this is far more frequent amongst the women than amongst the men—if but one, she should be secluded in a dark room; if more than one, they should be put together. Their mutual uproar seems to arrest their mutual

attention, and one will certainly very soon become quiet; and probably both, if the contest is long and severe. They may then be quietly restored to the class they came from. The peaceable and decently behaved, whether curable or incurable, and the convalescent should form a class. Those who are sometimes unruly, and who are very talkative and obtrusive, and who are more slovenly and negligent of their persons than the generality should form another class; and those whose habits are offensive should form another. In each of these divisions or classes, may be several grades; and translations from one division to another may frequently be necessary. If patients are permitted to associate with the servant or keeper immediately in charge of them, and whom they should be always taught to regard as a person in authority, they will of themselves form very useful sub-divisions. The more rational and industrious will court the society of the keeper or servant; and the latter will, from self interest, or idleness, employ the former in many little confidential duties: this, from the sort of good understanding it begets between them, I have found very conducive to the comfort, and recovery of the patient.

OF THE DISINCLINATION TO TAKING FOOD.

It cannot be a matter of surprise, if lunatics, being guided by natural impulse, rather than by the dictates of reason or preconceived notions, should occasionally take very little food: indeed I have known them for two or three days wholly abstain from eating; and sometimes, though very rarely, for a longer period. One man, John Booth, aged about 35 years, fasted fourteen days: he certainly took no food during this period, and though he had access to water, I believe he never drank any. He amused himself by walking in the galleries of the asylum, and very seldom sat, or rested; yet he appeared as equal to exercise at the end of the fortnight as at the commencement. His pulse continued good to the last; his tongue, which was furred and brown at the beginning, had become clean; and his breath, which was very offensive, as the breath of the lunatic usually is, had become as sweet as an infant's. He was generally very haughty and taciturn; but had now become more tractable, and I at last succeeded in drawing him into a conversation. He told me he had not experienced any benefit from eating; that it had frequently made him ill; and that he had therefore resolved to

refrain from it altogether. I asked him, if his objection extended to medicine also; to which he replied, he would take any medicine I thought fit to prescribe. I told him it would be necessary to drink it in beef tea, to which he consented. A pint of good beef tea was accordingly sent to him, and he readily took it; and in a convenient time the dose was repeated, and so he was humoured, till his appetite returned, when he again took his food as usual: and finally he was discharged well. I have very frequently known the lunatic refuse food when offered to him at stated periods, and yet he would take it readily enough, if permitted to eat when he thought proper. The plan adopted under these circumstances was to shut the lunatic in his room, and let his food be taken to him, and left without comment: the dinner was always made peculiarly grateful to the palate.

By this plan the lunatic may be induced to eat as much as the stomach is calculated to endure with convenience. I cannot call to mind more than one instance, where I thought it expedient to force a deranged person to take food; and I believe in that case I acted wrong. Patience and address seem all that are necessary, and I believe force can be but very rarely justifiable: yet to read the accounts of

some persons, even so recent that the ink is not dry on my paper, we should be led to expect, that in an asylum containing three or four hundred lunatics, *forcing*, as it is termed, must not only be a very frequent occurrence, but be a very annoying and formidable part of the duties of the day. I know, however, that a proper mode of management will render *forcing* very generally, if not always, unnecessary: nevertheless the means to compel a patient to swallow either food or medicine should be as constantly in the possession of the practitioner as any other instrument; for an urgent case may arise, where it may be necessary to compel an insane person to take medicine *instanter:* of which the following is an instance.

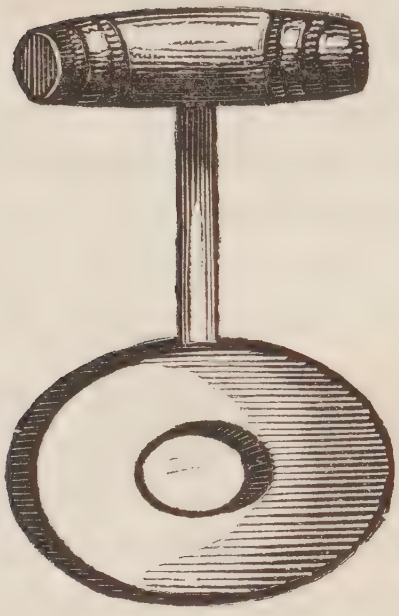
—— Fleetwood, a man about 45 years old, seized a vial, containing a dram of Argentum Nitrat. (lunar caustic) in solution, and at once drank it off. Within a few minutes I saw the man; he had been vomiting, looked excessively pale, and appeared very weak. Beef tea being at hand, I dissolved two ounces of common salt in it, and desired him immediately to drink it off. He obstinately refused. I instantly had him secured in a reclining posture, and introduced the Key into his mouth; and I

had no difficulty in making him swallow the basin full, nearly as speedily, as though he had voluntarily drunk it. The man was afterwards purged, and for a short time allowed broths, &c. and he sustained no very serious injury, though he never recovered a healthy appearance.*

Besides this Key, an instrument has been invented by Mr. Charles Newington, M. R. C. &c. As far as I understand his description of it, it is simply a syringe with a tube, (I suppose of silver) curved at the end, so as to adapt it to pass behind the last masticating or jaw tooth, when the teeth are pertinaciously closed by the patient; by which method the operator will be enabled to inject the food on the palate. This seems a convenient and simple method, but perhaps might be made more efficient, if another tube were fitted to it with valves, similar to the stomach pump, so that the feeding-tube being once introduced into the mouth, it might be kept there till the operation of feeding were finished. For Mr. Newington's description of his instrument, see "The Lancet," No. 161, Vol. x. page 845.

* Does not this case shew, that M. Orfila is correct in considering Muriate of Soda the antidote of Nitrate of Silver?

THE KEY.



The oval part consists of a plate of iron, about a quarter of an inch thick, (the edges being rounded and polished,) and of a size to fill the cavity of the mouth when the jaws are extended: in the centre is a hole about half an inch diameter. In using it, the Key is to be introduced edgewise, and then turned so, that it will fill the whole space, or nearly so, behind the upper and lower fore-teeth, and then the food can be introduced by the hole.

It will appear evident, that by means of a convenient sized pump, made on the principle of the stomach-pump, and this Key, either food or medicine may be injected into the stomach in any quantity, without being obliged

to resort to the harrassing, and very offensive operation of compressing the patient's nostrils, so as to force him to swallow before he is enabled to breathe.

The cases of Booth and Fleetwood I relate from memory: they may be found in my journals before alluded to.

ON THE METHOD OF SECURING LUNATICS.

The mode of securing a mad-man, so as to prevent him from injuring himself or others, has been the source of no slight difference of opinion; and several years since I procured from various places, particularly recommended for their humane methods, the apparatus of restraint used in them respectively; by which it was obvious, that the intention to avoid injury was the leading object, but the execution of that intention singularly deficient. Strong leather straps, carefully padded and covered with soft wash leather, were used to secure arms and legs; and as it is possible this mode may still be followed in some receptacles for lunatics, I shall point out one or two palpable defects in the construction of these straps. First—no padded strap can be buckled sufficiently

secure round the wrist or the arm, so as to prevent a violent lunatic from working his hand out, without producing a painful pressure on the limb, and a partial stoppage at least, of the circulation; added to which, the warmth of the padding speedily produces perspiration, this soaks the leather, and makes it, in some considerable degree, stick to the skin; in this state it produces much friction, so that in fact it cannot by any means be securely used in the high state of delirium, and indeed, it has always appeared in my practice, that this padded apparatus never could be used with propriety. I never could secure the violent with it, and others of course had no occasion for it. The strap round the arms, as used in the Dublin Lunatic Asylum, is much better than these padded wrist straps, &c. but I have frequently been obliged to have this taken off, from the pressure, necessary to secure, or produced by the exertions of, very violent lunatics, being too great to permit free circulation; and the old straight waistcoat was on these accounts certainly preferable to either of these modes. But there are many powerful objections to the straight waistcoat; in hot weather particularly it is very oppressive to the patient, it cramps him exceedingly, and is at all times peculiarly offensive. After trying various methods, the

most effectual as to security, the easiest as regards bodily constraint, and the least liable to erode the skin, I have represented in the lithographic sketches annexed.

Fig. 1, Represents what I have termed the Muff, it consists of two strong pieces of leather sewed together at the sides, with a thinner piece of leather running diagonally across, on the inside, to separate, and thus to prevent the lunatic from tearing his own hands, which he would frequently do but for this contrivance; the edges of these strong pieces of leather are secured to the patent iron wrist lock—the lock being made on purpose.* The hands being introduced into each pocket, the lock is shut upon the wrist, and the patient is effectually prevented from tearing or destroying things, or taking off his clothes, nor can he strike so as to effect any injury; at the same time he has nearly the full and ordinary use of his arms.—*See fig.* 3.

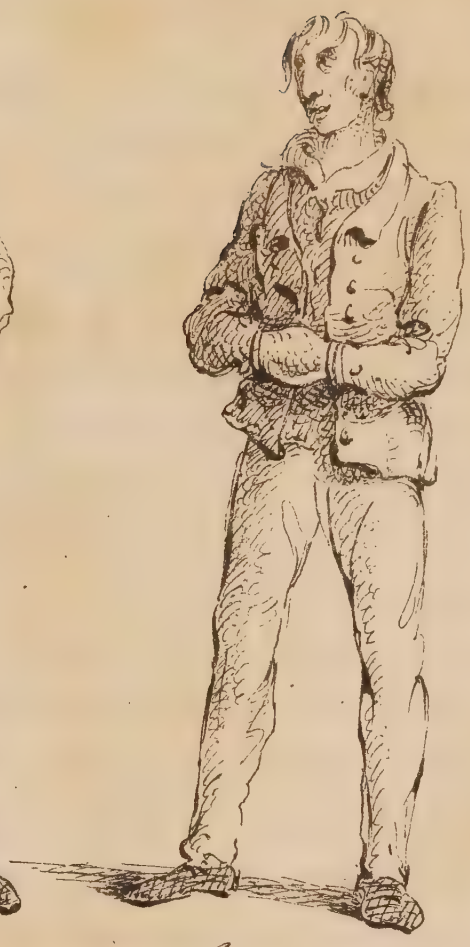
Fig. 2, Represents the Sleeves, by far the best mode of securing a violent lunatic I can imagine. It simply consists of two large strong leather sleeves, closed at the bottoms, and fastened across the shoulders by a strap, and staple and lock; and again in the same manner across the

* Mr. Cornthwaite, saddler, of Lancaster, used to make the Muff, &c. that I used. I always found him a very moderate man, and a good workman.

6

3

Pocket Muffs.



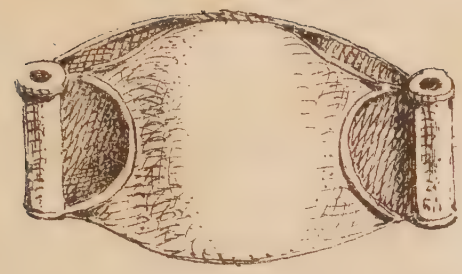
Common Muff

5

Back View of the Sleeves.

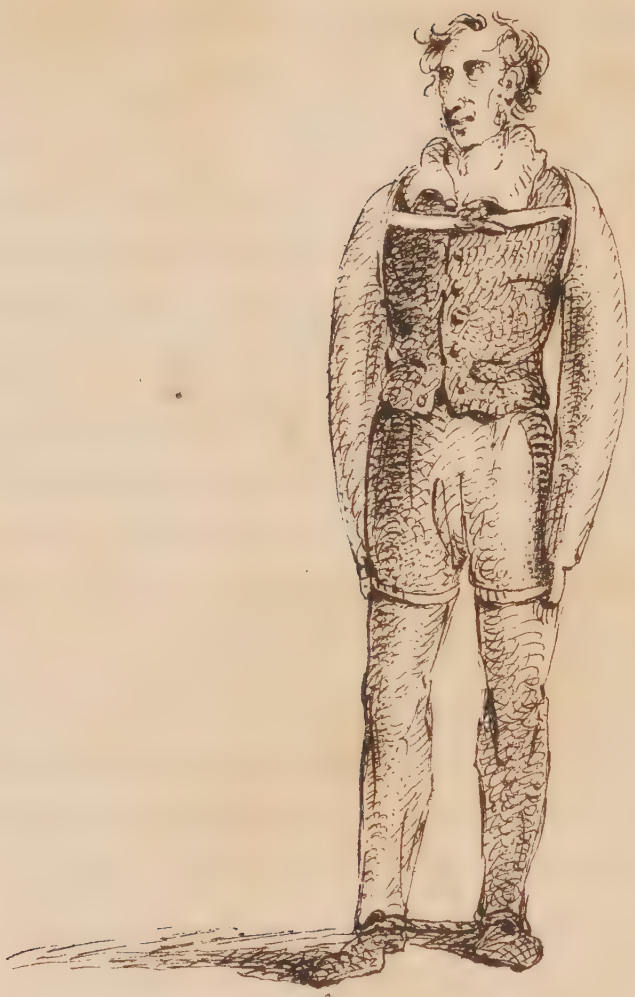
James' Lithography

3



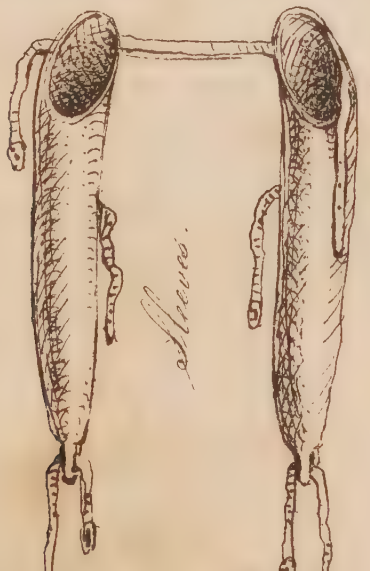
Muff

4



Strict Coercion

2



Sleeves

James's Lithog.

back by the elbows, the sleeves being attached in front by a broad short belt across the upper part of the breast. In extreme cases where the patient makes violent exertions to break the strap across his back, I also add another strap, passing round the thigh, and through a loop sewed to the bottom of the sleeves, and then he stands with his arms, as it were loosely by his sides, in this position he can make but feeble exertions with them. It is evident, that if in addition to this, the common leg locks be added, the patient will be rendered almost powerless, without producing any injurious pressure whatever, although the exertions of the patient should be the most violent and incessant. Patients have worn these sleeves for months, without sustaining the slightest injury from them. If at any time they, or the muffs are found too warm, small holes may be easily punched in them so as to admit of ventilation. *See fig.* 4, *front view with straps round the thighs, and fig.* 5, *the back view, without straps round the thighs.*

Fig. 6, represents a man with pocket muffs, which are made on the same principle that the other muffs are made, one is attached to each side like a pocket, and they are fastened in this position by a strap round the waist. It will frequently please a patient to give him his choice between the muff and the pocket muff.

I am firmly convinced, that leg and wrist locks are infinitely preferable to leather straps. The iron locks possess numerous advantages, *but the clinking of the chain should be, by all means, prevented, for I have known it impress lunatics with the most gloomy apprehensions.**

MISCELLANEOUS REMARKS.

SENSATIONS IN THE SKIN.

Lunatics frequently complain of strange sensations in the skin. William Parke said he had hog worms, or sloe worms or threads dragging through his skin. Thomas Emmett was afflicted by little gnomes called crickets, they had very long sharp beaks which they thrust into his skin, tormenting him in all parts of his body, so that he could neither rest day or night; his complaints, month after month, were incessant. Another moaned and complained, (he was a melancholy lunatic,) that "one part of his skin burned like fire, whilst the other was chilled,

* "See the Particulars, &c." by a Gentleman.

as though cold water was being poured over it." Yet no diseased appearance could be detected in either of these individuals. Several similar cases have been noticed.

Wounds appear to heal more readily in the insane than in the sane. A man, whose name I do not recollect, fell in a fit and lay some considerable time on a flag that covered a hot flue; his hand, which was under him, was pressed by the weight of his body on the hot flag, the back of his hand being next the flag; a severe burn was the consequence, which not only ended in the sloughing of the tendons of the "*extensor communis digitorum manus*" of that hand, but of a considerable portion of the "*interossei externi*" also. The man's general health was previously very bad, and it continued bad, and I fully expected a very unfavourable result, and that at least the power of extending the fingers perfectly would be lost; no sooner however, had the sloughs come away, than the most beautiful striæ of muscular fibres began to make their appearance, in penniform lines, and to replace the lost portions of the interossei externi muscles, and finally, in a few weeks he had the perfect use of his hand, extending his fingers with as much facility as ever. A violent female lunatic by her struggles to get loose, fractured the fæmor four

times successively, each time between a fortnight and a month after the union had commenced. At last I had a strong deal case made as nearly as possible to the shape of the leg and thigh, reaching externally from above the trocanther, and internally as high as possible, and passing under the foot. In this case, the limb was firmly secured and padded. She continued however, constantly to move the fæmor on the pelvis, by twisting the body about; yet not the slightest untoward symptom occurred. It is well known that caries of the bones is rarely met with among lunatics. I have found the sloughing ulcers of old bed-ridden lunatics, and others, uniformly improved, and frequently healed, by the Cataplasma Fermenti, and by dressing with the spirit Tereb. rect. and Cerat. Resinæ.

Abscesses are not unfrequent, and sometimes are deep seated and very extensive. When the case has speedily ended favourably, the mind has been considerably relieved, and sometimes sanity has immediately succeeded.

Consumption of the Lungs I have not found so peculiarly frequent, as I had been led to expect.

HYDROTHORAX.

It is a singular fact, and demanding the assiduous attention of the physician who has the

care of the insane, that the *symptoms* of dropsy of the chest, are extremely obscure in them; they never, or but rarely, complain of the dyspnea, or the inability to lie down in any way; and yet this disease does frequently exist, and is frequently overlooked.

BOWEL COMPLAINTS.

Disorders of the Bowels, ranging from simple diarrhæa to the severest degree of dysentery, I have found so very frequent and very fatal, among lunatics, that in the year ending June 1824, no less than 71 of 250 patients were attacked with these complaints; but whether this be the result of any local cause I cannot take upon me to determine; but I am of opinion that the water which was used, added to the contiguity of the building to boggy ground were the chief causes of this frightful mischief. A lady of my acquaintance could never drink the water undiluted from the spring, without being vomited, as though she had taken an emetic. Dr. John E. Greding, however, in his Medical Aphorisms on Melancholy, &c. says, "of all people, old maniacs are least affected with costiveness, only three in a hundred: whilst no less than thirty would be troubled with diarrhæa." But he says nothing of dysentery, and we must conclude, that he had not met

with it, we should therefore look for the origin of this dreadful malady in some local cause, and in bad water and marsh miasmata we have very efficient agents.

ATROPHY.

The last days of the lunatic are frequently closed with the wasting of the body, without any diseased action sufficiently *marked* to account for it; he has an extraordinary power of disguising or disregarding his sensations; a wasting of the body therefore should rouse the most vigilant attention of the physician, who should repeatedly scrutinize into the state of the patients corporeal functions.

APPETITE FOR FOOD.

Patients in the worst state of insanity, for the most part, eat voraciously; on a rough calculation they would eat twice as much as sane persons, and they absolutely require more than sane persons.

VISION.

Lunatics very frequently assert they have seen strange sights, not unfrequently the devil, to whom they uniformly assign a peculiar

colour; this doubtless arises from diseased perception from sight; or otherwise, the lunatic would most probably adopt the vulgar notion, and call him black; to the lunatic however, he has been black and blue, yellow, green and speckled.

SMELL.

John F——, though a remarkably clean man, was so offensive to the nose, that the servants on opening his bed-room of a morning could with difficulty, go in to open his window, the stench was so intolerable; and all his fellow patients complained of him. The smell of lunatics however, has been for many centuries familiar to those who have paid attention to their treatment, and J. Van. Swieten and Herm. Boerhave have both noticed, a most insupportable smell in opening the heads of lunatics; I have also remarked the same kind of smell, but not by any means insupportable. The smell I have perceived bears a striking similitude to the urine of cats, and not unlike that which I have experienced in the water of patients under treatment with the Digitalis and Pil. Hydrarg. for the cure of Hydrocephalus when those medicines were acting favourably. The smell of the *person*, however, is different; I at this present time have a lady under my care,

the smell of whose skin is very offensive, nauseous and brassy. I am well acquainted with a gentleman, the smell of whose skin sometimes resembles the smell left on the hands after handling new and unvarnished brass, being barely recognisable. All these persons have suffered severe afflictions, and I am therefore disposed to regard these smells as symtomatic of mental disturbance. Since writing the above I have learnt that the lady was for three weeks, by her own account, deranged in mind.

ON THE ATMOSPHERICAL VICISSITUDES.

In winter, foggy close weather has been productive of great restlessness, and great uproar; and amongst the epileptics, of an extraordinary exacerbation and increase of the fits.

In summer, fine warm weather produces precisely the same effect, the effect being encreased if the wind is high and easterly.

Fine fresh weather in winter is accompanied by unusual tranquillity, and decrease of epileptic fits.

Cold wet weather about midsummer is productive of the same quietude, and decrease of fits amongst the epileptic.—These remarks are drawn from memorandums made only two successive years, and they must be

corroborated by a more extensive observation before perfect reliance can be placed upon them; though I was perfectly ignorant of their result, till I examined them for the purpose of making this report. I have always observed lunatics much disturbed by sudden and frequent atmospherical changes.

COLD.

A strange ignorance was at one time prevalent, respecting the indifference of lunatics to cold, and their animal powers to resist its effects. Lunatics, like all other invalids, cannot bear cold so well as persons in health; in fact, they are always chilly, and seek warmth, and their animal powers are below the healthy standard, frequently indeed greatly reduced, and their inability to resist the effects of cold is in proportion. The maniac who imagines he has urgent affairs of the utmost importance, disregards cold, and if he is in action, as I believe he always is, does not suffer from it; but this inattention to external impressions is by no means peculiar to the insane, the sane, under equally powerful mental excitement, are equally inattentive to the impulses of mere sensation.

OF THE MOON.

I notice this on account of some vulgar opinions. Lunatics are certainly more noisy on a bright moon-light night than on a dark night; but this is wholly caused by the light. I am satisfied the moon has no other influence, either over lunatics, or epileptics.

ATTENDANTS.

It is of importance that all who have the charge of ministering to the insane, should have prepossessing persons and manners; and nothing in either, that could be easily ridiculed, much less excite ridicule; because all lunatics are physiognomists, and many of them very acute and sarcastic observers.

ON THE TABLES OF CLASSIFICATION.

As the following tables of classification are upon a principle different from any I have seen, and as far as I know, original; I feel it incumbent upon me to explain why I have deviated

from the beaten path. I have already stated the extreme difficulty I experienced in clearly, and accurately, ascertaining the causes of insanity, when they were supposed to be moral. I beg to add, that I have found it no less difficult *clearly* to ascertain the physical causes of insanity, that is, the corporeal derangement that had given *origin* to the mental disorder; nearly an equal obscurity hangs over both. And although it had been perfectly easy for me to have constructed tables, with an imposing display of moral and physical causes; frequently backed by the certificates of medical men;* yet, after some years attentive observation and reflection upon the subject; I feel convinced, that from various sources, many, and serious errors, would inevitably have been the result: and I therefore abandoned a method, that at the first view, seemed so satisfactory; and that was moreover, seductive from its plausibility, and easy from its simplicity. Being most clearly satisfied, that by this mode I cannot with certainty instruct, I will not carelessly mis-inform. Hence, feeling it my duty to avoid a classification, that I was most anxious to prosecute, I

* I mean no disrespect to these gentlemen, I know full well the great difficulties every medical person encounters in investigating these cases; and that he may account it a rare felicity if he is not misled by ignorance or design.

have adopted the following:—Having at least the advantage of being founded in facts within my own knowledge; and I trust not uninteresting, nor unimportant, from the views it opens; more particularly as respects the moral state of the patients remaining in the asylum, during the year, ending the 24th of June, 1824. By the tables for that period it will appear, that under an alteration in management, the *decrease in improvement* amongst the men, was alarming. We find that in the old cases, of 127 men remaining in the asylum 24th of June, 1823—sixty were improved, being *nearly one half.* Whilst on the other hand, of 137 men, (old cases,) remaining in the asylum 24th of June, 1824, not more than 31 were improved, being *less* than *one-fourth.* And again, in the tables of the old cases of women, a still greater falling off obtrudes on our notice, the decrease in improvement is full 75 per cent. that is, of 108 women, remaining in the asylum 24th of June, 1823—53 were improved, whilst of 105 remaining in the asylum 24th of June, 1824, only 17 were improved; and both amongst the women and the men, we find an extraordinary increase of unimproved melancholy cases. The numbers of *unimproved* old cases, under the class "Melancholy," were on the 24th of June, 1823.

Men..... 4
Women..... 8—total 12

The numbers of the same class on the 24th of June, 1824, were

Men..... 16
Women..... 24—total 40

Another view of the tables presents an interesting result; and coupled with what I feel I must say, by and bye, will afford an excellent practical lesson on management. In the tables of old cases we find that of 358 men

97	were melancholy, of whom recovered	22
26	were irascible and melancholy, of whom recovered.....	7
123	melancholy, of whom recovered..	29
52	were cheerful, of whom recovered	37
38	were irascible and cheerful, of whom recovered.....	14
90	cheerful, of whom recovered.....	51

And of 219 women

79	were melancholy, of whom recovered	16
38	were irascible and melancholy, of whom recovered.....	6
117	melancholy, of whom recovered..	22

12	were cheerful, of whom recovered..	8
23	were irascible and cheerful, of whom recovered.....	11
35	cheerful, of whom recovered.....	19

Hence we perceive at a glance, that the lunatic whose mental emotions partake of the cheerful character, will probably be restored to reason, though his insanity may have endured many months, or even years; and that this probable recovery is in proportion to the predominance of the cheerful disposition, and as it is unalloyed by irascibility. I thus arrive at the conclusion, *that to keep the deranged in mind cheerful, is of paramount importance.* Of the cheerful class, even in old cases, more than two-thirds recover, that is, 45 out of 64. Whilst of the melancholy, not one-fourth recover, or only 38 out of 176, and even this is a very large proportion of recoveries.

It is curious, and interesting also, to notice how greatly melancholy preponderated among the women, during the latter period, in 1824, as well as the prevalence of irascibility among them at both periods. Thus we find of 219 insane women, the mental emotions of 61 were characterised by irascibility; whilst of 358 men, irascibility only characterised 64.

It now becomes my painful duty to explain the cause of this retrocession in the march to recovery; it will answer every practical purpose if my readers are informed that the system of management, such as I have pretty fully sketched, was very much infringed, that the gay and cheerfu l demeanour which I had, by every means in my power inculcated and fostered, both amongst the patients and among the attendants, was quite superseded; but as I have pointed out all that occurs to me to be important in the moral and religious treatment of the insane, I may be excused the invidious task of enlarging upon this topic, which, although it may corroborate, will add nothing to, the doctrine I have already laid down.

On inspecting the tables, the attentive observer may be surprised at the great number of deaths, and the comparatively small number of recoveries. I apprehend this proportion has arisen partly from the truly benevolent and philanthropic principles on which County Lunatic Asylums are founded; these principles admit of no exceptions on account of the hopeless condition of the sufferers. The fatuous—the idiot—the epileptic share an equal protection with the most promising case of the deranged in mind: nor does the philanthropic energy

abate with an abortive effort to restore sanity, when this is unfortunately the result; but, consistent with itself, it extends a jealous protection to the close of life; and thoughtless, incompetent relatives, are not even permitted to remove the sufferer, from an ample and generous provision; from this cause the column of deaths is but little lessened by the columns of "discharged relieved," and "discharged by request;" nor at all, by the rejection of those hopeless and epileptic cases, which are altogether excluded from many other establishments for the insane. In a large hospital for the sick, many die under the most favourable circumstances; but if a hospital be used as an asylum, and *final home* for the *hopeless*, can it be matter of surprise if the majority should end their days there?

On the recent cases in the tables ending the 24th of June, 1823, I beg to make a few observations. Of the men who died, one was 70 years old, two were in the last stage of consumption of the lungs, and one was epileptic. These four had passed all reasonable hope of recovery when admitted, and should therefore, in estimating the chances of recovery, be taken from the deaths in the recent cases; and considering the number improved and under

treatment, I think I am borne out in assuming, that nine, out of ten, recent cases, will recover, if managed conformably to the rules I have laid down, for the moral and medical treatment of such cases.*

* See the Abstract of the Tables, p. 140.

TABLES.

TABLES exhibiting the total number of MEN and WOMEN LUNATICS admitted in, discharged from, and remaining in, the Lunatic Asylum, for the County of Lancaster, from the first opening of the Hospital, on the 28th July, 1816, to the 24th June, 1823.

MEN.

Classification of cases conformably to the predominance of Mental emotions. OLD CASES. Being from four months and upwards, arranged after protracted observation.	Dismissed, with the causes of dismission.				The state of mind of those remaining, relative to its state at the time of admission.			Total number admitted.	Total number discharged.	Total number remaining.
	Recovered.	Relieved.	By Request.	Dead.	Improved.	Unaltered.	Worse.			
Irascible	2	0	0	6	4	5	0	17	0	0
Irascible and Cheerful	11	0	0	4	3	6	0	24	0	0
Irascible and Melancholy	6	1	1	3	7	7	1	26	0	0
Cheerful	32	0	1	5	7	2	0	47	0	0
Melancholy	18	4	6	32	14	4	5	83	0	0
Sometimes Cheerful, at others Melancholy	8	0	1	3	7	6	2	27	0	0
Epileptic	3	2	1	25	4	11	3	49	0	0
Fatuous	0	1	1	6	13	11	2	34	0	0
Idiots	0	0	1	1	1	1	1	5	0	0
Total	80	8	12	85	60	53	14	312	185	127

MEN. Classification of cases conformably to the predominance of Mental emotions.	Dismissed, with the causes of dismission.				The state of mind of those remaining, relative to its state at the time of admission.			Total number admitted.	Total number discharged.	Total number remaining.
RECENT CASES. Being from about three months and under, arranged after protracted observation	Recovered.	Relieved.	By Request.	Dead.	Improved.	Unaltered.	Worse.			
Irascible	0	0	0	1	0	0	0	1	0	0
Irascible and Cheerful	7	0	0	0	1	0	0	8	0	0
Irascible and Melancholy	4	0	0	1	1	0	0	6	0	0
Cheerful	3	0	0	0	1	0	0	4	0	0
Melancholy	10	1	0	1	1	0	0	13	0	0
Sometimes Cheerful, at others Melancholy	3	0	0	0	1	0	0	4	0	0
Epileptic	2	0	0	1	0	1	0	4	0	0
Fatuous	0	0	0	0	0	0	0	0	0	0
Idiots	0	0	0	0	0	0	0	0	0	0
Total	29	1	0	4	5	1	0	40	34	6
Total of Old and Recent Cases	109	9	12	39	65	54	14	352	219	133

WOMEN.

Classification of cases conformably to the predominance of Mental emotions.	Dismissed, with the causes of Dismissal.				The state of mind of those remaining, relative to its state at the time of admission.			Total number admitted.	Total number discharged.	Total number remaining.
OLD CASES. Being from four months and upwards, arranged after protracted observation.	Recovered.	Relieved.	By Request.	Dead.	Improved.	Unaltered.	Worse.			
Irascible	0	1	0	7	2	3	1	14	0	0
Irascible and Melancholy...	4	1	2	6	6	16	2	37	0	0
Irascible and Cheerful.....	11	0	0	4	13	3	0	31	0	0
Cheerful	4	0	0	0	5	0	0	9	0	0
Melancholy	12	3	1	14	9	8	4	51	0	0
Sometimes Cheerful, at others Melancholy	0	0	0	4	9	5	0	18	0	0
Epileptic	1	0	0	4	2	5	2	14	0	0
Fatuous.....	0	0	0	2	7	4	0	13	0	0
Idiots.....	0	0	0	0	0	2	0	2	0	0
Total of Old Cases...	32	5	3	41	53	46	9	189	81	108

WOMEN.

Classification of cases conformably to the predominance of Mental emotions.	Dismissed, with the causes of Dismissal.				The state of mind of those remaining, relative to its state at the time of admission.			Total number admitted.	Total number discharged.	Total number remaining.
RECENT CASES. Being from about three months and under, arranged after protracted observation.	Recovered.	Relieved.	By Request.	Dead.	Improved.	Unaltered.	Worse.			
Irascible	0	0	0	0	0	0	1	1	0	0
Irascible and Melancholy	4	0	0	0	3	0	0	7	0	0
Irascible and Cheerful	8	0	1	0	1	0	0	10	0	0
Cheerful	9	0	0	0	4	0	0	13	0	0
Melancholy	10	1	1	2	1	0	0	15	0	0
Sometimes Cheerful, at others Melancholy	3	0	0	0	0	0	0	3	0	0
Epileptic	1	0	0	0	1	0	0	2	0	0
Fatuous	0	0	0	1	0	1	0	2	0	0
Idiots	0	0	0	0	0	0	0	0	0	0
Total of Recent Cases.	35	1	2	3	10	1	1	53	41	12
Total of Old and Recent Cases	67	6	5	44	63	47	10	242	122	120

TABLES exhibiting the total number of MEN and WOMEN LUNATICS admitted in, discharged from, and remaining in, the Lunatic Asylum for the County of Lancaster, from the opening of the Hospital, 28th July, 1816, to the 24th June, 1824.

MEN. Classification of cases conformably to the predominance of Mental emotions. OLD CASES. Being from four months and upwards, arranged after protracted observation.	Dismissed, with the causes of Dismission.				The state of mind of those remaining, relative to its state at the time of admission.			Total number admitted.	Total number discharged.	Total number remaining.
	Recovered.	Relieved.	By Request.	Dead.	Improved.	Unaltered.	Worse.			
Irascible	2	0	0	6	1	7	0	16		
Irascible and Cheerful	14	0	0	6	5	12	1	38		
Irascible and Melancholy	7	1	1	3	3	8	3	26		
Cheerful	37	0	1	5	5	4	0	52		
Melancholy	22	4	7	35	10	16	3	97		
Sometimes Cheerful, at others Melancholy	9	0	2	4	6	11	0	32		
Epileptic	6	2	1	28	1	12	8	58		
Fatuous	1	1	3	10	0	19	0	34		
Idiots	0	0	1	2	0	1	1	5		
Total	98	8	16	99	31	90	16	358	221	137

MEN.

Classification of cases conformably to the prodominance of Mental emotions.	Dismissed, with the causes of Dismission.				The state of mind of those remaining, relative to its state at the time of admission.			Total number admitted.	Total number discharged.	Total number remaining.
RECENT CASES.	Recovered.	Relieved.	By Request.	Dead.	Improved.	Unaltered.	Worse.			
Being from about three months and under, arranged after protracted observation.										
Irascible	0	0	0	1	0	0	0	0	0	0
Irascible and Cheerful	7	0	0	0	0	0	0	0	0	0
Irascible and Melancholy	4	0	0	1	0	0	0	0	0	0
Cheerful	6	0	0	0	0	0	0	0	0	0
Melancholy	11	1	1	1	0	0	0	0	0	0
Sometimes Cheerful, at others Melancholy	3	0	0	0	0	0	0	0	0	0
Epileptic	2	0	0	1	0	0	0	0	0	0
Fatuous	0	0	0	0	0	0	0	0	0	0
Idiots	0	0	0	0	0	0	0	0	0	0
Total	33	1	1	4	0	0	0	39	39	0
Total of Old and Recent Cases	131	9	17	103	31	90	16	397	260	137

WOMEN.

OLD CASES.

Classification of cases conformably to the predominance of Mental emotions. Being from four months and upwards, arranged after protracted observation.	Dismissed, with the causes of Dismissal.				The state of mind of those remaining, relative to its state at the time of admission.			Total number admitted.	Total number discharged.	Total number remaining.
	Recovered.	Relieved.	By Request.	Dead.	Improved.	Unaltered.	Worse.			
Irascible	0	1	0	7	1	5	0	14	0	0
Irascible and Melancholy	6	1	3	11	2	12	3	38	0	0
Irascible and Cheerful	11	0	0	4	0	8	0	23	0	0
Cheerful	8	0	0	1	1	2	0	12	0	0
Melancholy	16	3	2	22	9	24	3	79	0	0
Sometimes Cheerful, at others Melancholy	1	0	1	4	2	12	1	21	0	0
Epileptic	1	0	0	7	2	8	2	20	0	0
Fatuous	0	0	0	3	0	7	0	10	0	0
Idiots	0	0	0	1	0	1	0	2	0	0
Total	43	5	6	60	17	79	9	219	114	105

WOMEN.

Classification of cases conformably to the predominance of Mental emotions.	Dismissed, with the causes of Dismissal.				The state of mind of those remaining, relative to its state at the time of admission.			Total number admitted.	Total number discharged.	Total number remaining.
RECENT CASES. Being from about three months and under, arranged after protracted observation.	Recovered.	Relieved.	By Request.	Dead.	Improved.	Unaltered.	Worse.			
Irascible	0	0	0	0	0	1	0	1	0	0
Irascible and Melancholy	6	0	0	0	1	0	0	7	0	0
Irascible and Cheerful	10	0	1	0	3	0	1	15	0	0
Cheerful	11	0	0	0	4	0	0	15	0	0
Melancholy	12	1	2	2	1	1	0	19	0	0
Sometimes Cheerful, at others Melancholy	5	0	0	0	0	0	0	5	0	0
Epileptic	2	0	0	0	0	0	0	2	0	0
Fatuous	0	0	0	1	0	0	0	1	0	0
Idiots	0	0	0	0	0	0	0	0	0	0
Total	46	1	3	3	9	2	1	65	53	12
Total of Old and Recent Cases	89	6	9	63	26	81	10	284	167	117

By the preceding Tables we learn the result of Old and Recent Cases.

OLD CASES.

Men.		Women.	
Recovered	98	Recovered.....	43
Discharged relieved..	8	Discharged relieved..	5
Do. by request.....	16	Do. by request.....	6
Dead.	99	Dead.....	60
Improved and under treatment	31	Improved and under treatment	17
Unaltered	90	Unaltered.....	79
Worse	16	Worse	9
Total	358	Total	219

RECENT CASES.

Men.		Women.	
Recovered	33	Recovered	46
Discharged relieved..	1	Discharged relieved..	1
Do. by request.....	1	Do. by request.....	3
Dead.....	4	Dead.....	3
Improved and under treatment	0	Improved and under treatment.....	9
Unaltered.....	0	Unaltered	2
Worse	0	Worse	1
Total	39	Total	65

AN ACCOUNT

OF THE

VARIOUS SENSATIONS FELT BY A PERSON DEPRIVED OF REASON BY A FEVER;

AS ALSO

A DESCRIPTION OF THE SCENES IN WHICH HE THEN THOUGHT HIMSELF EMPLOYED.

"Man's life is woe; eternal war with woe,
He who deserves it least obtains it most."

YOUNG'S NIGHT THOUGHTS.

DEDICATED TO P. S. KNIGHT, M. D. &c. &c.

AN ACCOUNT, &c.

OF all the punishments entailed on us by the fatal disobedience of our great progenitor Adam, none I think is so dismal as the eclipse of reason. The discerning mind will distinguish between *accidental* madness, and madness occasioned by intemperance and other guilty causes. Lunacy may be occasioned by the dint of bodily oppression; for physical causes not unfrequently give rise to moral effects, that is, lower the spirits, and in process of time extinguish, or rather suspend the operations of reason. This then is in my mind accidental madness, where sickness foregoing, and existing without a guilty origin, begets madness. This may to some appear a too minute distinction. I should indeed be happy could I point out as clearly as I see them, the two different causes of lunacy. It is the character of a philosopher to examine both causes and effects. If any person were to tell a learned Doctor that the patient subjected to his care was diseased in mind and not in body, the Doctor would probably conclude that the individual who undertook to inform him spoke but from a vulgar notion, for he (the Doctor) would most likely be of opinion that madness must, medically speaking, be accompanied by some disease either internal or external; I only speak on supposition, and I deem it right to explain my ideas as I go along, however original they may seem, in the eye of so experienced a Doctor as you, Sir, are confessed to be.

Having now Sir, thus far explained my mind on the subject of lunacy, I shall proceed, without saying more, to an account of my own sensations whilst bereft of the light of reason.

PARTICULARS, &c.

For some time before I was affected with mental derangement, I was in the habit of indulging in great anxiety of mind, and in an unwise melancholy.

The former of these was probably the effect of constitution, the latter, though partly the same effect, was considerably augmented by the premature death of my beloved father. Notwithstanding these two hostile enemies to health and intellectual repose, I generally kept a very *nice equilibrium* of mind by the aid of patience, and the prepollent reflection that it was foolish, to lament that too much, which is transitory and fading. This may be the remote cause of my intellectual darkness, but I think in truth there is a more *immediate* cause, and this I take to be a too great fondness for drinking prodigious quantities of beer in order to surpass a professed toper; I remember to have drunk from three to four sizeable jugs at a time, and afterwards to have been in such a condition as scarcely to keep on my legs; I shortly after got a sore throat, attended by a dull head-ache; during this attack I entertained hopes of an immediate recovery,—my expectations were sharpened by the announced return of some of my friends from their vacations.* They were still further excited

* My patient was finishing his studies at College when attacked.

by the news I received from one who told me on his arrival that his brother, my bosom friend, would be arrived in a few days, he presented me a letter from this friend in which was written an account (perhaps this is fancy) that I was not to study philosophy that year, this at first perusal depressed my spirits, but I cheered by saying to myself—oh! no, it is true, I am to study logic, and with this thought I smiled and began to think how ardent a student I would prove. Here I believe my derangemeut began—I cryed aloud for prayers, for retreats, &c. My mind felt an uncommon shock! I fancied myself at deaths'-door—I called in advisers—I was in a dreadful state of agitation, but alas! nothing appeased the storm begun. I had been ordered to lie in bed some days, the Doctor who attended me observing, that a great visible change had taken place since last he saw me, for that was when I just caught the sore throat, &c.—said to me "my dear John your are quite another man since last I saw you, what is to do dear, keep up your spirits," he then left orders that I should be taken up, and indeed I rejoiced, for I foolishly thought (being deranged) that if I quitted my bed, I should quit my pains also. The time arrived when I was to rise, my clothes were placed at hand, I sat up in a pensive mood, and delayed stirring. The attendant approached, and said "oh! dear Sir, do not delay, you must get up." I smiled and said yes,—yet was as dilatory as ever, he approached again. "What John, not stirring, for shame! said he—to this I made no reply, but fiddled with my clothes, and began to talk wildly of a good conscience. I then began to talk of liberty, and thundered out one of my friend Henry Grattan's speeches. "Never

mind Grattan," said somebody, out upon you, you idiot I exclaimed, I am ready to meet him—he is coming to meet me, "Grattan is dead," said another, you have lied said I, I have a letter from him. The infirmarian impatient of delay, once more drew nigh, and seeing me unable to assist myself in rising, endeavoured to assist me; during his efforts I wet the bed, and I could not help it. He then got me a clean shirt and put it on, and when preparations were making to get me up, I had very strange notions; I thought I had no longer a claim to be a man, I thought I was big with young pigs—in a word, I thought when I was getting up, that I was delivered of them. I do not add this for the sake of indecency,—I only say it because it is true, and that the reader may form a more correct idea of the incipient progress of my complaint. When I had risen, I was conducted to an arm chair, and here I had a lucid interval of restored reason. I reflected on the necessity of patience, and promised the fortitude of a man, and declared that I thought my end approaching rapidly; the infirmarian replied, "no such thing, you are not even in danger," and I was often told the same by the minister, who assured me were there any danger, they would acquaint me of it. The president was sent for, and said the same; I thought that death must be inevitable now; for I was aware that prudence conceals the sad tidings of death from every invalid. I told the president that I thought he deceived me, he seemed much moved, and taking me by the hand said, with great tenderness, "no my dear friend, think not so, be of good cheer." As soon as I had been up a short time I felt a return of my disorder, and I called aloud for assistance, and the in-

firmarian told me to be easy, that there was no need of it, and desired me to remember my promise of fortitude," "then you won't assist me? said I—ah! insult me, then farewell reason, farewell life," and I remained sullen and silent, groaning with dreadful pain. They placed the table near me, and on it placed a pillow, on which I might recline my arm, around me sat some scholars who seemed to jeer and to talk silently against me; to crack nuts, and laugh, so that I really believed I had assumed the face of a pig. When night approached, methought I heard a dismal howling in the court of somebody buried alive; I thought this was my body, and my spirit howled in the air—so I thought! my blood freezed with horror and fear. I asked the cause of this sad clamour, "there is none dear, none," answered the attendant. I called him over and whispered in his ear something about being removed to another apartment, he said, "perhaps you are ashamed dear." I then thought "surely I am a pig," he took me to another room and put me to bed; and I cannot describe what horror came upon me: I thought blood fell from heaven on my bed—I startled—then lay down—then startled again—I thought a nail dropt from the Redeemer's hand—my God! how alarmed I was!!!! I then fell into a sleep—an interval came after this, I thought time had changed its course, and we were seven or eight years earlier than we really were, at another moment I thought time stood still, a few days advancing, I believed myself to be one of the three Divine Persons of the Sacred Trinity, and I thought I must die for man."

"At one time I thought there were three Irishmen

suffering on a cross, and that I was one, and that when we all died, Ireland would be free."

"I very frequently thought that some of my friends were actively employed about me;—their images were present to my mind, and fancy was so warm in portraying the likeness of each, that at last, *nothing* could shake my belief of their corporal presence." "I walked or rather was walked up and down the room —after which I sat hard by the fire; still I had a guard —I think more than one, which I thought very importunate, and I often insinuated that it was not my wish they should guard me, or fancy me irrational; that I was no impostor, however they may desire to have me considered such. When evening drew nigh, I approached the window, and persisted to look out for some time; I thought I saw my friends walking on the road close by, and beckon to me, I pushed my head forward, and broke the glass. The attendants were alarmed least I cut my head, and under the impression of fear, withdrew me from the window, and placed chairs under it to prevent a nearer approach. Here I may date the beginning of my more close confinement: this act of mine was termed insanity, violent insanity; for they did not, I presume, like vulgar, or rather insane *fractions*. I was soon confined to a vile strait jacket, and fastened in bed with ropes which went across, and which were bound underneath; I supposed the rope to have been as thick as a ship's cable. An ancient friend of mine came to see me—he was not a scholar, but a servant—a strong powerful man. But this friend, of whom I am speaking, came alas! as a ruler, and a stern master he proved. I must do him the justice, to declare that I entertain the

conviction, that what he did, he did for my good; though I cannot conceal, that I thought him on several occasions, guided by whim, and an unjustifiable severity; (I have since been informed he was provided with a horse-whip.)" *My patient then proceeds to relate the circumstance of his removal from the college; he says* "the fatal day dawned ungrateful, and brought deep gloom on my foreboding soul; I devised divers plans to escape the rigour of the sentence, but all in vain! vain are the efforts of a madman opposed to reason." *He then relates another scene of delirious creation, full of horror, like a dreadful dream: yet amidst all this busy scene of horrors he remembers the visits of the Apothecary and Physicians who attended him;* "the Apothecary entered, felt my pulse as usual, and wrote something in his pocket book, bowed and left me; I cannot accurately say what followed *immediately* next; I believe I was brought back to the college; and in this altered situation scenes no less strange and novel presented themselves."

An altercation took place between a favourite class mate, and another he disliked—immediately his warm fancy, his "heat oppressed brain," realizes all the ceremonies and usual attendants of a duel; frightful afflictions still pursue him, his friend, and his opponent fight, fire several shots, and at length his friend falls, begs "an honourable tomb," *and requests him* "to take up the quarrel and fight himself. This," *he continues,* "I promised, though not without reluctance," *he fights, is shot to the heart, (this idea probably owes its origin to some spasmodic action in the heart,) he fires as he falls, and wounds his adversary in the right shoulder.* "This

exasperated him to such a degree that he fell on my dying corpse and kicked it like a devil!" *His imagination then realises the coffin, hearse, armorial bearings, heralds, and finally the burial and lamentation of friends. It is probable, that this dreadful hallucination lasted some days, and all this mischief appears to have been produced by the altercation alluded to. The burial seems to have effectually changed the concatenation of ideas. He reverts to the suffering on the Cross, &c. and says,* " here it were useless to describe every rising sentiment, and it were endless to do so, I will therefore pass on. I often times believed that I was in the midst of the Chevy Chace. Chivalry looked bold all around; contention burnt inextinguishable. It delighted me much to see some thrown off their high mettled steeds, and others mounting in their place; some couching the quivering lance, others shouting to the hounds. At one time, I thought it was some great hunt in Yorkshire, in the spirit and manner of olden times. Various and distinguished were the families I saw. I fancied that a contention arose, the object of which was to ascertain which was the most ancient family in Ireland; I put in my claim and adduced the family legends, which *distinctly* trace our family to the Kings of ———, and I whistled the O. B.'s march, which was composed when the ancestors of our family went from ———, to meet the King of ———, this is matter of fact. I thought however, one triumphed who was a friend of mine; I was backed in the contest by all my friends in England and Ireland, by an ancient Viscount in Ireland, whose

family is of very remote antiquity, and by several Noblemen whom I knew."

"I was very fond of music in my deranged state, and got one of the attendants to sing to me, the song which affected me most began with these words

"I am grieved to the heart, &c."

"In proportion as the symptoms of delirium were exasperated, my mind felt the shock occasioned by the absence of reason more severely.* I have already remarked that I felt very partial to music, whilst irrational; I leave it to more adequate judges to account for this ruling partiality. My mind was so much relieved by hearing either vocal or instrumental music, that every pain was hushed to repose and forgot to smart, whilst my ear and mind feasted on what they so ardently sought. When I was unable to get any body to sing to me, I, for the most part sung to myself, and was oftentimes so much affected even by this imperfect melody, that I could not refrain from tears. Sacred music produced the strongest effect on my mind; indeed it was the only sort of music which I desired to hear."

"The attendants with whom I was surrounded pleased me very little; they seemed to me to make merry at my expense; to make me the butt of all their vulgar jests.

* Does not this appeal powerfully to the heart of every man?—This declaration should never be forgotten by those, to whose care the insane are consigned. It seems that the sufferer recognizes the exacerbation of his disorder, and dreads its accession, even in the worst stages of mental alienation: a fact, contrary I believe, to all pre-conceived opinions on the subject.—P. S. K.

This mortified me not a little, for a generous soul is more forcibly affected by contempt than by oppression. I was convinced in my own mind that I could easily turn their untimely wit against themselves, but something held me back and I could only indulge a silent contempt. One of them appeared to me more good natured than the rest, and paid more attention to me; he gave way to me in most things; laughed when I laughed; but little I presume did he think that I was laughing at his comical visage, and the important posture in which he sat. He took his seat next me, crossed his legs, continued to shake the one uppermost, and to smoke his pipe; every now and then I elbowed him, and often drove his pipe half down his mouth, and himself off the chair. All this made me laugh, and he exclaimed in a mighty curious tone, eh my! and laughed loud. I used occasionally to frighten him by rising up, and taking hold of the bed-posts, and which one day I nearly brought down. He, however, was no less amusing than his less pleasing comrades, for when it grew dusk, this comical worsted-stocking rogue, took great care to put me to bed, and then he drank his ale in peace: but I, aware of the diversion going forward, resolved, if I was doomed not to share it, that I would do all in my power to interrupt it, for I used to shout out and kick the bed-posts very fiercely, besides resolution, there was something which impelled me to do so. This made the attendants very wrath, and they were wont to run at me, and strike me on the head, but my courage did not abate a jot by this usage. One night I was left attended by only one guard, I perceived this, and determined to take every advantage, I immediately

got out of bed, in spite of the intreaties of the attendant when he saw this he placed a table against the door, and sat upon it; my first effort was to remove the table, but not being quite strong enough to do so while he opposed, nor yet very unequal to him in strength, I resolved to supply what strength was wanting by cunning; I accordingly abandoned, for the time, my design of forcing the table from the door, and proceeded to walk up and down the room; the servant, seeing that I staggered, got off the table and supported me, I leaned upon his shoulder, and walked along thus assisted, very firmly. I took care to keep the attendant rather in the rear, and having crossed the room three times, I determined on executing my meditated purpose, I made a sudden spring forward, dragged away the table and threw the door wide open. Resistance now was vain on the part of the alarmed guard; he was held motionless, no doubt in admiration of the degree of cunning displayed by a madman; and he saw that on this occasion I was more knave than fool."

"The persons commissioned to guard me played many a trick, they drank tea at the foot of the bed, got on the top of it, put on masks, and strove to terrify me; but I outwitted them, I told them, each by his name, to pull off their masks, that I knew them. One of them uncovered his face, and asked me who they were? I told him as I thought; and he assured me I was grossly mistaken. After some uninteresting events I fancied I saw a combat in the heavens, and a bright radiance occasioned by the meeting of swords; this appeared to last for some time; I believed that I discovered the plan of making this display of light, and that I could make the

same appearance be visible in the fire, this I then really thought I did at the time."

"The taylor came to my room and began to take my measure for clothes; I asked him why he measured me, he replied that I was going away, he afterwards brought a hat, a pair of new shoes, and a green bag, &c. &c. Shortly after some one came and told me to walk down stairs, but seeing that I was very slow in my motions, he carried me in his arms, went through the infirmary, where I beheld some school-fellows, who nodded to me, but I was unable to return the compliment. At last we came to the court, passed under the arch of the towers, and arrived at the front of the house; here stood several of the masters, and I think the president; I saw a chaise at the door, and beheld the apothecary dressed up in top boots, &c. I was put into the chaise, and the apothecary got in after I was seated—some of the masters said "good bye, God bless you," but I was speechless—the door of the chaise was closed—the coachman mounted the driving box, and we started, as I thought, very fast. We had not gone far from the college when the apothecary felt my pulse and asked me how I was? I smiled and said "very well." Shortly after he remarked that I was a very silent traveller. We journied along for a considerable way, during which time I remained perfectly mute: I thought I observed some flowers in the Doctor's hand, which he put to his nose ever and anon, and then took them away again. I commenced singing, my song was in the latin tongue; I thought by it I would make the apothecary sick, and then escape, and indeed either I or the coach produced the desired effect, for when we stopped to change

horses he looked very pale." *Whilst the horses were being changed, my patient got some refreshment, but he* " did not observe the apothecary eat anything himself," *he says* " my notions on this journey were very peculiar, I fancied we were travelling to the sun, I afterwards fancied we were journeying along without horses, but my idea afterwards altered, and I thought that the driver whipped on his horses at a desperate speed, in spite of orders to stop; sometimes imagination would have it that the apothecary encouraged him to go faster and faster! till at length we drove up to the Asylum. I did not know at what place we had arrived. The apothecary got out and I after him, I saw a lady come down stairs, the apothecary handed her a note; we were shown into the room for strangers, and in a little time requested to walk forwards; we came through an iron gate into the middle gallery, then into the keeper's room, and lastly, into the day-room, where the apothecary shook hands with me and I saw him no more—still I thought he was in the house, and continued so to think until returning reason dispelled the doubt. I remember no striking event to have happened.* Bed-time arrived and I was shewn my room, which I was loth to enter, that night went by I can scarcely tell how; in the beginning of it I reflected on the change that had taken place, and lamented it, a little. I thought however, I was in Trinity College." *At this time he became my patient, I found him exceedingly taciturn, and answering only in monosyllables, if*

* I conceive the most studied eulogium could not have conveyed so forcible a compliment to the management of the Asylum, as this short sentence,—" I remember no striking event to have happened."—P. S. K.

he vouchsafed to answer at all; he assumed singular attitudes, in which he would stand for hours, generally with an intelligent smile on his countenance, but without uttering a syllable. "I can also recollect (*he says*) to have stood in very curious and awkward positions, breast very much projected, right shoulder above the left, and head more than *naturally* erect. I can account for this; I had been, before I came here, much in the habit of private speaking, with motions for my own amusement, and benefit; I made it a point to imitate the awkward posture of some of the celebrated orators of whom I had heard. The passion which, of late years I had entertained for public oratory, did not abandon me in the absence of reason; I often fancied I was addressing either Parliament or a Jury on some very important question."

"I can recollect the Governor coming to visit the patients; he used to come twice a day, once before noon, and once after, about five o'clock in the evening. The first name called out was Sherington, I think I would remember him if I saw him, he was a modest young man, often very low.* I did not know who the Governor was; I sometimes supposed him to be ———, Esq. of ———, (*an uncle of the narrator's*) long since deceased." *It is rather singular, that this gentleman for a long while considered me either his uncle or his father, and my wife he took to be one of his cousins.* "I imagine I was ten days in the middle gallery, I was at length removed, being found not clean enough for the

* This is a very correct description of Sherington. At this time Mr. ———, had all the superficial appearances of a person in the worst stage of dementia, he never spoke, except in monosyllables, and was quite regardless of the wants of nature.—P. S. K.

gallery. This I could not help, as I scarce knew any thing that was *really* passing, and I was so absent in mind, that I hardly ever was aware of any thing I did, till it was done. All my actions were involuntary ; in a word, I acted like an automatom which is moved by mechanism, and has no power of motion in itself, much less of thought." " After my removal from the middle gallery the first circumstance which I recollect was my interview with Dr. Knight, the Governor, in the keeper's room below stairs, (I am in the middle gallery.) I did not know at the time that he was either Doctor or Governor. I heard Mr. R——, call him " Master," I asked him to be bled, and he enquired of me if I would like a warm bath, I said I would, I asked some very impertinent questions, at which he laughed ; I asked for tea or coffee, and was told I should have both. Before I was cupped I was not aware of the nature of the operation, I fancied they were trying to kill me by firing pistols at my neck."*

" After I had remained some time in the stone gallery, it was found necessary to chain me in bed, for I had the habit of getting out during the night and lying on the floor. I lost all patience when I was chained, and was

* This hint is worth attending to, the terror of such apprehension may cause much more injury than the cupping could do good. I would therefore advise that the scarificator be never used in cupping lunatics, but that the method exhibited by Baron Larrey at Mercer's Hospital in Dublin, be adopted, which is thus described in Vol. X. of the Lancet, p. 829.—" He first marked out the place of the operation by burning some tow under a glass, and taking an instrument out of his pocket, resembling a horse phleme, scarified the part within the circle, with a lightness of touch, and velocity of movement, that indicated great manual dexterity."—P. S. K.

greatly agitated by anger. I concluded from this, and also from hearing some chains *rattling* that I must be in a land of slavery, I do not think this notion is very incorrect; for though I was in England where liberty is, and ought to be commensurate with the soil, yet I was a slave in a moral sense, for reason bowed in tame submission to the tyrant insanity.* Independence is in the mind of man or it is no where. I never ceased to struggle with my chains during the night, and in the morning it seemed to me that I had been conveyed away many a mile, how I cannot say; all I know is, that so I thought. The noise made by the shutting and locking of doors appeared very strange to me; and *that* occasioned by the opening of them, had a no less striking effect on my mind.† In this stage of my mental infirmity, I enjoyed some lucid intervals of reason; I felt fully convinced that I was deprived of my intellectual faculties, and I was perfectly reconciled to my lot, by the reflection that if I was a moral fool, I could not be a moral culprit, in other words, that I was innocent; and the vast, the inexpressible consolation which so grateful a consideration generated, amply compensated for present suffering; indeed I was so far led away, that I frequently fancied myself the Redeemer of the World, and that I had come down from heaven to save lost man; every thing I did, every pain I endured, I thought was by the appointment of him who sent me, and I was calmly reconciled. If at any time I was more than

* Here is another useful hint, see my "Observations on Securing Lunatics."—P. S. K.

† All the room doors, about fifty in each gallery, were locked every night, and unlocked in the morning.—P. S. K.

usually afflicted, I would exclaim, " Father not my will, but thine be done,"—and I experienced much relief in this resignation of my own will. I was so unshaken at that time in this conviction, that I fancied I saw preparations made for my crucifixion, I beheld the executioners, the ropes, the nails, &c. but instead of being dismayed at so alarming a sight, I felt more than ordinary joy. In process of time, these pleasing and lofty thoughts flew away; but they were succeeded by others more modest, and full of delight; I longed ardently for death, as I looked upon life to be the only obstacle which separated me from the sight of God. I often fancied that I beheld Adam and Eve in the garden of Eden, though I was informed of their transgression, and saw the Angel with a flaming sword, coming to turn them out of Paradise. I took Mr. W——, the keeper below, for Pontius Pilate, and the assistant who bled, for one of those who crucified the Son of God, and I thought the red cloth which faced his coat, was a sign of his infidelity."*

" When I was confined to the warm room, next the sick room, I imagined I was watching the sepulchre in which lay the body of Christ,† and I looked upon one of the patients who lay fast asleep on the floor, as one of the guards who had been stationed there to prevent the Apostles from stealing away the body. All of a sudden it began to hail very fiercely so that I concluded the Resurrection was at hand." " The first notion I formed of the bottom stone gallery was that it sheltered high-

* He appeared at all times to have some dislike to both these individuals.—P. S. K.

† I conceive this hallucination must have continued some weeks. P. S. K.

way robbers who resorted thither by night, and sometimes by day, to share amongst themselves the captured booty. I fancied the whole building lay entirely under ground, and was known only to themselves, that they took up people on the highway and conveyed them to their secret haunts, and would in time teach them how to plunder their neighbours. At this time I quite forgot that I had ever been in the middle gallery, and how I had fallen into the hands of these robbers was to me a mystery."*

"One day I imagined I saw a vast mass of water rushing down from behind the garden wall, I inferred that in a few moments the whole edifice would be swept away in the coming flood. I often descried, as I supposed, troops of horse soldiers on the hill. But before I pass by the coming waters of which I am speaking, I will observe that it was my opinion, that all the danger was occasioned by some immense dam that had been incautiously let off, and that the swell of waters which flowed high, and threatening, had really, in their headlong career from the higher grounds, buried several noblemen and gentlemen's seats in their ruffled and deep bosoms."† *His imagination rolls on with the waters, deep and troubled—the noblemen and gentlemen with their tenantry, &c. fly to their neighbours and*

* From the long, gloomy, and cavern-like appearance of the lower or stone gallery, the inference drawn is by no means extraordinary. We may hence gather how important it is, that places for the abode of the insane should be cheerful, and present nothing unusual in appearance.—P. S. K.

† The house he was in, the Lancashire Lunatic Asylum, is built in a hollow, and a steep hill rises immediately contiguous to

kinsfolk, who are in their turn inundated, great distress and confusion ensues, all the flour in the country is either washed away or poisoned, and he imagines the food he had was as a substitute for bread. From this he naturally passes to a consideration of the plate he ate off, which being a wooden trencher, he says, "I was very averse for a time to eat my dinner off the wooden plates, but if we follow Chesterfield in all his niceties, we must part with more comfort than any true born Englishman will vouchsafe to give up." "Shortly I recovered my speech, and used to be talkative, though often I held my peace and said not a word. One day I saw the Governor and I did not know him; this was in the keeper's room in the stone gallery, at first I took him for my father, but afterwards for a near relation, and finally for what he was; I cried much during the interview, and said nothing. He went away saying, "I will come and see you soon again."

My patient then speaks of the peculiarities of many of his fellows, of the many strangers that used to visit the galleries, &c. "Were I to record every thing I fancied I saw and did, I might fill volumes, but let not the reader do me the injustice to think that I forget them." "I was subject to frequent involuntary bursts of laugh-

this part of the building, where the idly curious have a close supervision of the whole building; as these spectators stand on the edge of the hill, nothing is seen behind them, this and their elevated situation gives them a martial appearance. The reservoir did burst: we see how his imagination turned it to account, and may again see how vastly important it is, to keep all unusual occurrences from the recognition of the insane.—P. S. K.

ter, and to much weeping.* The day that I accompanied the Governor through the galleries I took him for the Duke of Kent *incog.* and I thought he came in disguise to find out who was loyal and who not, because I fancied his family were loosing the Crown, and that a dreadful rebellion existed in England. When he wrote,† "I supposed he was writing down the names of those who would enlist, I hoped he would not write me down, for I did not wish, at that crisis, to go to war. I thought there was something odd in the stamp of my hat, and that the crown was represented on the ground, and the lion trampling it under foot; I looked upon this as an acknowledgment of my authority."

"I come now to speak of my ideas subsequent to my removal from the stone to the middle gallery.‡ Though the fever had much abated, though I was no longer so violently parched with thirst as I had hitherto been, yet my opinions were far from being correct. I imagined that every one I saw wore a borrowed title, and bearing the keepers countenance those who pretended to dignity, &c. I thought I too would be no less important than my upstart neighbours. I accordingly declared myself to be Lord Byron. I think I had more claim to that title, on account of the similarity of our names, than many had to their pretended appellations. I was fully convinced that it was not my title: but I thought if I could pass for his Lordship that I need desire no more.

* He must have indulged in this in secret, for I saw but little of it.

† This was when I was making my clinical notes in my diurnal progress through the galleries.

‡ His habits had become more correct, and I now considered him convalescent.—P. S. K.

I fancied I would be better fed, and so it turned out, for the following night I got meat for supper which was quite a treat. Some time after I was desired to walk out, and I met Mrs. Knight on the race course. I took her to be my youngest cousin G. B. of C. I can remember all the conversation very correctly, she told me there was a young lady waiting for her at the top of the hill, and she promised me a mince pie, which I afterwards got. The walk in the open air had a curious effect on me, for I had not been out for a long space of time; methought every stone spoke, and I was glad to return home. I used often to ask where I was? when in the stone gallery I was told, near Lancaster, but now for the first time I got a glimpse of the town. On going out and beholding the front of the house, I thought it was Kildare House in Ireland, belonging to the Duke of Leinster."

"I was peculiarly hostile to pork ever since my dismal metamorphose, for I always fancied I was eating myself when I eat it." "When I was in a flighty state I found that I could speak French very fluently, though before, I never made a practice of talking French, still I understood it perfectly, could discover what others who talked it were saying, and could talk it myself also, but not quite so flippantly as a Frenchman. This matter of fact fully corroborates a remark of Mr. (*Dr.*) Haslam, whose "Sound Mind" I have perused with a considerable deal of pleasure. I think it is a learned work, and as it handles a subject of a complex and abstruse nature, I deem it entitled to more than ordinary praise. For the most part I was very far from being thready, either in my conversation or behaviour. In the morning I was

low and said nothing, in the evening I engrossed all the talk, and my topics were seldom or never on the same subject. I cannot say I was gairish, for I frequently obeyed the voice of moderation, and restrained a too offensive volubility of tongue. One night, not long after I had entered the middle gallery the second time, I was musing on some of Shakespear's plays, I was thinking of the ghosts which he introduces on the stage in some of his plays. I had not ruminated long before I said "enter ten thousand ghosts," and scarcely were the words spoken when the door of my chamber flew open, and people bearing lighted candles in their hands entered —they were the keepers, and with them the Governor. I was not at first aware that it was the Governor, but on reflection I soon discovered it to be so."

"I do not think there are any more events worth recording, for shortly after that I recovered my reason, though time doubtless improved it. I date the perfect recovery of my reason about March, 1821, (six months senseless,) by some it had been computed to have been restored sooner. I had been in the middle gallery nearly two months about March, when I first went to chapel and wrote letters, which were rational. Here then Providence, whom it pleased to take away from me my reason, bountifully gave it back again, and with the poet Virgil I may exclaim

"Salve motus, feret hæc aliquam
tibi fama Salutem."

But whilst I am grateful for so acceptable a favour, I must arm against future danger, and wisely reflect as reason was lost by one disease, it may be eclipsed by another."

CONCLUSION.

"Oh! the depth of the profundity of the wisdom of God, whose works are unsearchable."—St. Paul.

"Mankind make it the chief part of their employment to ponder on the dispensations of Providence, and often, too often alas! measure the depth of Omnipotence by the short line of human reason. If any thing strikes their view which at first sight they cannot account for, they instantly cry out, without allowing one moment for the wisdom of reflection, that "their lot is hard, is unjust, is insupportable." Would they but pause before they gave vent to complaint, their words would be far other than they are. They would not arraign the decrees of heaven before the biassed tribunal of human judgment. That man must be either very proud, or very ignorant who presumes to scan the ways of God: who takes upon himself to say how the order of things should stand, where favours should be dispensed, and where health withheld. There is not I am fully persuaded one seeming evil in life, behind which some good does not lurk. Even in lunacy there lie latent many advantages; he who has been deranged may thence discover how great a blessing the enjoyment of reason is—he may learn a salutary lesson; that humility and submission are

indispensably requisite, where the understanding is so unstable; and these he may use as antidotes against more dreadful consequences. What man is there who, if he were sailing on the sea, was driven by adverse winds against some dangerous rock, would not, for the time to come, seize on a more favorable time for embarking, and steer clear of the peril which he had before seen! Would he not have it publicly proclaimed, that on such a spot there was some dangerous rock, concealed by the overflowing waves? it would be his duty to do so. Life is the sea on which we sail, and imprudence the rock we must shun. Our little barks are frail enough of themselves; if they carry us safe to our journey's end we ought to be content, without foolishly raising storms in order to boast of weathering them."*

"Even so it behoves every sensible member of society to point out the perils he has undergone, and mastered; and it will form no small part of the pleasure derived from the restoration of health or reason, to reflect that whilst we ourselves have survived the storm, it lies in our power (it should in our will) to let others profit by our experience, and this we can never do so effectually as by becoming the historians of our own misfortunes. Some one of a more ungenerous cast of mind may exclaim,—"this is only a screan for vanity, a mask for ambition, an attempt at effecting private views." If to instruct others at our own expence, to put the improvident on their guard by narrating our own imprudence, if, in fine, to endeavour to serve the public in spite of

* Doubtless he here alludes to intoxication, one of the causes to which he attributes his derangement.—P. S. K.

the dictates of pride be "an attempt at affecting private views," every honest and candid man must grant, the concession is extorted from him, that "these private views" are honourable. Whatever backwardness may have been raised in the mind of the individual, who is desirous of recording his own feeling during the suspension of reason, by any dread of the sarcasms of the illiberal, has been stimulated into exertion by the certain applause of the more indulgent; and though a publication of this sort (intended at present only for the private inspection of individuals,) does not seek to be put in competition with any other, still it hopes much from the indulgence of the reader; and when any feels inclined to criticise too severely, he must reflect that neither time nor pains were bestowed on the trifles he is reading."

"I am, Sir,

Your most obedt. humb. and

obliged servant,

——— of ———"

My patient finishes with a dedication to me, in which he takes occasion to remark that he thinks "there exists more derangement in the English nation than the Irish, and this I attribute, he says, to the wide difference in the character and manners of the two Kingdoms. The English are given to melancholy, and indeed so are the

Irish, but that of the latter is their own creation, and a pleasing melancholy, that of the former is forced upon their minds by constitution, and is involuntary, hence the disparity of results."

"My object then in penning these "Particulars" I have already explained, they are too hastily written to be faultless, and have too much sincerity to deserve unmodified condemnation. If however, in the rude garb in which I have dressed them, they contribute to excite entertainment, if whilst they convey a smile to the cheek, they arm the mind of the reader against any inconveniences necessarily arising from an irrational state of mind, my object is fully obtained. The pains which I experienced during a delirious condition of fancy and imagination, will in that case, be a source of future gratifying reflection—"Sweet will be the balm of their memory, and precious the odour of their consolation."

"Certavi et Vici."

THE END.

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